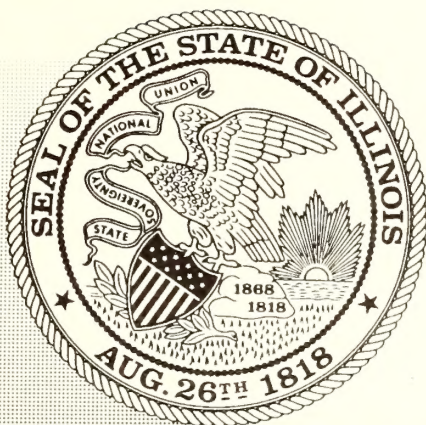
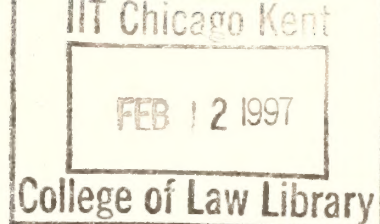


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Steve Livingston



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Springfield, IL 62756
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DEBT COLLECTION BOARD

NOTICE OF PROPOSED RULES

- 1) Heading of the Part: State Agency Accounts Receivable

- 2) Code Citation: 74 Ill. Adm. Code 910

- 3) Section Numbers: Proposed Action:
- | | |
|--------|-----|
| 910.10 | New |
| 910.20 | New |
| 910.30 | New |
| 910.40 | New |
| 910.50 | New |
| 910.60 | New |

- 4) Statutory Authority: Implementing and authorized by Section 8 of the Illinois State Collection Act of 1986 [30 ILCS 210/8].

- 5) A Complete Description of the Subjects and Issues Involved: This Part will implement provisions in P.A. 89-511. Specifically they establish timetables, criteria and procedures for the Debt Collection Board's assumption of responsibility for agency accounts receivable that have not been collected by the agency.

- 6) Will this rulemaking replace any emergency rulemaking currently in effect?
No

- 7) Does this rulemaking contain an automatic repeal date? No

- 8) Does this rulemaking contain incorporations by reference? No

- 9) Are there any other proposed rulemakings pending on this Part? No

- 10) Statement of Statewide Policy Objectives: Rulemaking does not affect units of local government.

- 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may submit written comments within 45 days after the date of publication to:

Stephen W. Seiple
720 Stratton Office Building
Springfield, IL 62706
217/782-9669

- 12) Initial Regulatory Flexibility Analysis: Does not apply to small businesses.

- 13) Regulatory Agenda on which this rulemaking was summarized: This rule was not included on either of the 2 most recent agendas because: The authorizing legislation only recently became effective and also because of

DEBT COLLECTION BOARD

NOTICE OF PROPOSED RULES

uncertainty as to when the proposed rules would be filed.

The full text of the Proposed Rule(s) begins on the next page:

DEBT COLLECTION BOARD

NOTICE OF PROPOSED RULES

TITLE 74: PUBLIC FINANCE
CHAPTER VIII: DEBT COLLECTION BOARDPART 910
STATE AGENCY ACCOUNTS RECEIVABLE

Section 910.10	Scope
910.20	Definitions
910.30	Assumption of Jurisdiction by Board
910.40	Agency Referrals
910.50	Actions by Board
910.60	Format; Board Procedures

AUTHORITY: Implementing and authorized by Section 8 of the Illinois State Collection Act of 1986 [30 ILCS 210/8].

SOURCE: Adopted at 21 Ill. Reg. _____, effective _____.

Section 910.10 Scope

This Part is to implement Public Act 89-511 and set forth when and how the Debt Collection Board assumes jurisdiction over State agency accounts receivable.

Section 910.20 Definitions

- a) For purposes of this Part, "State agency" shall have the meaning found in the Illinois State Auditing Act.
- b) For purposes of this Part, "State agency account receivable", "account(s) receivable", or "receivable(s)" shall mean amounts due a State agency from non-governmental entities which are legally enforceable, which have not been lawfully certified as uncollectible and for which there is no legal barrier to referral to the Board for recovery. Amounts due the General Assembly, the Supreme Court and the several courts of this State and the constitutionally elected State Officers are included only if they elect to have such receivables subject to the Board's jurisdiction. The definition shall not include:

- 1) amounts less than \$100 (NOTE: Nothing in this Part prohibits agencies from referring receivables to the Board in amounts less than \$100.);
- 2) amounts due the Illinois Student Assistance Commission under the student loan program.

Section 910.30 Assumption of Jurisdiction by Board

- a) Accounts receivable which are more than 180 days old will

DEBT COLLECTION BOARD

NOTICE OF PROPOSED RULES

automatically be subject to the Board's jurisdiction unless the applicable State agency attests that the accounts fall into one of the categories set forth in subsection (c) of this Section. During the initial 180 day period the agency should pursue its own internal collection procedures. Standards for initiating collection are set forth in Section 26.40.10 of the Comptroller's Uniform Statewide Accounting System (CUSAS) Manual. Collection procedures should include steps such as a reasonable written billing cycle, telephone contacts, personal contacts through agency collectors, and wherever possible, referral to private collection vendors.

- b) For purposes of this Part, the 180 day period begins to run on the day the receivable becomes enforceable. The beginning date used to calculate the 180 day period for debtors having multiple debts will be established by the agency based on procedures approved by the Board.
- c) The Board will not assume jurisdiction over receivables more than 180 days old if:

- 1) The receivables are subject to an acceptable installment payment plan.
- A) Such a plan should provide for repayment of the entire remaining balance due together with applicable interest over a period not to exceed 3 years. If no interest rate is specified by law, the agency should require the use of simple interest at the judgment rate of 9% per year.
- B) If an agency believes that it is in the best interests of the State to accept, as part of its collection efforts, payment plans for terms in excess of 3 years, it must seek the Board's specific authorization.
- C) Receivables subject to an acceptable installment payment plan which are delinquent under that plan for more than 90 days automatically become subject to the Board's jurisdiction unless the receivables are subject to subsection (c)(2), (3), (4) or (5) below.

- 2) The Board determines, based on information provided by the agency:

A) That:

- i) the receivables are currently the subject of ongoing collection efforts by the agency pursuant to collection procedures approved by the Board; and
- ii) in light of such collection efforts, it would not be in the State's best interest for the Board to assume jurisdiction over such receivables.

- B) Factors to be considered by the Board to determine whether an agency's collection procedures should be approved include:

- i) the statutory and regulatory methods available to the agency for use in collecting its receivables;
- ii) whether the agency has been using such methods, as well as applicable methods described in subsection (a)

DEBT COLLECTION BOARD

NOTICE OF PROPOSED RULES

above, to collect its receivables as expeditiously as possible;

- iii) the number of agency staff dedicated to collection of accounts receivable;
- iv) the volume of agency receivables;
- v) the agency's historical percentage rate of collections;
- vi) the level of automation of the agency's collection system.

C) If the Board approves an agency's collection procedures pursuant to subsection (c)(2)(A)(i), future receivables (or categories of receivables) subject to ongoing collection efforts pursuant to such procedures need not be submitted to the Board for exemption.

D) The Board may periodically request an agency to submit information concerning its collection procedures. If, based on such information, the Board determines that an agency's collection procedures are no longer acceptable, approval of such procedures may be withdrawn and the Board may assume jurisdiction over the agency's receivables more than 180 days old.

3) The receivables are currently the subject of an ongoing wage levy whether that levy is the result of a judgment entered in circuit court or an administrative levy issued without judgment.

4) The receivables are currently the subject of litigation being pursued in the State of Illinois through the Office of the Attorney General, State's Attorneys' Offices or, where authorized by the Attorney General, by private counsel retained on behalf of the agency.

5) The receivables have been referred to a private collection vendor by the agency and the receivables have been with that vendor for 90 days or less. Agency contracts with private collection vendors entered into after the effective date of this rulemaking should provide that receivables referred to the vendor for which there have been no payments or other activity should be returned to the agency after 90 days.

6) Receivables subject to one of the exceptions listed in subsection (c)(2), (3), (4) or (5) above shall automatically be subject to the Board's jurisdiction 60 days after the agency has ceased ongoing collection efforts (other than those referenced in subsection (d)) pursuant to such exceptions.

d) Referral of a receivable to the Comptroller's offset program or institution of a license revocation proceeding either before or after the expiration of the 180 day period set forth above does not automatically prevent the receivable from becoming subject to the Board's jurisdiction.

Section 910.40 Agency Referrals

DEBT COLLECTION BOARD

NOTICE OF PROPOSED RULES

The 180 day period set out in Section 910.30(a) does not prohibit an agency from seeking to have receivables placed with the Board at an earlier point. If an agency has exhausted its internal procedures and if it has no private collection vendor under contract, it may refer receivables to the Board prior to the end of the 180 day period.

Section 910.50 Actions by Board

If receivables become subject to its jurisdiction, the Debt Collection Board will take one of the following actions:

- a) Return the receivables to the applicable State agency with:
 - 1) directions for additional collection efforts by the agency; and
 - 2) instructions on how the agency should report the status of its efforts to the Board;
- b) Refer the receivables to one of the Board's outside collection vendors;
- c) Refer the receivables to the Attorney General for collection (this action may be taken only if the amount is greater than \$1,000);
- d) Certify the receivables as uncollectible and initiate bad debt write-off procedures.

Section 910.60 Format; Board Procedures

The Board will specify:

- a) the format for State agencies to report their receivables.
- b) the procedure for State agencies to demonstrate that receivables should not be subject to the Board's jurisdiction pursuant to Section 910.30(c).

DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

1) Heading of the Part: Whistleblower Protection2) Code Citation: 56 Ill. Adm. Code 353

3) Section Number:

353.100	<u>Proposed Action:</u>
353.110	New Section
353.200	New Section
353.300	New Section
353.310	New Section
353.340	New Section
353.350	New Section

4) Section Authority: Implementing and authorized by Section 11b(c) of the Prevailing Wage Act [820 ILCS 130/11b(c)].

5) A Complete Description of the Subjects and Issues Involved: The proposed rulemaking implements Public Act 88-359, Section 5 (codified at 820 ILCS 130/11b), an amendment to the Prevailing Wage Act [820 ILCS 130], that requires the Director of Labor (in a manner he or she deems appropriate) to investigate the alleged discharge, discipline, or discrimination against "whistleblowers" in violation of Section 11b(a) of the Act, and to take affirmative action to remedy such conduct, including but not limited to, ordering the removal of any information contained in personnel files and the rehiring or reinstatement of whistleblowers with backpay.

6) Will this proposed amendment replace an emergency rule currently in effect: No

7) Does this rulemaking contain an automatic repeal date: No

8) Does this proposed rule contain incorporations by reference: No

9) Are there any other proposed amendments pending on this Part: No

10) Statement of Statewide Policy Objective: Establish standards for the efficient handling of applications to review alleged discharge, discipline, or discrimination against "whistleblowers" in violation of Section 11b(a) of the Prevailing Wage Act [820 ILCS 130/11b(a)].

11) Time, Place and Manner in which interested persons may comment on the proposed rulemaking: Written comments should be submitted, within 45 days after this notice, to:

Scott D. Miller, Chief Legal Counsel
 Illinois Department of Labor
 160 North LaSalle Street, Suite C-1300
 Chicago, IL 60601

DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

(312) 793-1805

12) Initial Regulatory Flexibility Analysis: The Department has determined that this proposed rulemaking will affect small business as that term is defined by 5 ILCS 100/1-75.

13) Regulatory Agenda on which this rulemaking was summarized: July 1996

The full text of the Proposed Rule(s) begins on the next page:

DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

TITLE 56: LABOR AND EMPLOYMENT
 CHAPTER I: DEPARTMENT OF LABOR
 SUBCHAPTER b: REGULATION OF WORKING CONDITIONS

PART 353
 WHISTLEBLOWER PROTECTION

SUBPART A: GENERAL PROVISIONS

Section
 353.100 Purpose of this Part
 353.110 Definitions

SUBPART B: OBLIGATIONS AND PROHIBITED CONDUCT

Section
 353.200 Obligations and Prohibited Conduct

SUBPART C: ADMINISTRATION AND ENFORCEMENT

Section
 353.300 Filing an Application
 353.310 Investigation
 353.320 Issuance of Decision
 353.330 Request for Hearing
 353.340 Hearings
 353.350 Judicial Review

AUTHORITY: Implementing and authorized by Section 11b(c) of the Prevailing Wage Act [820 ILCS 130/11b(c)].

SOURCE: Adopted at 21 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL PROVISIONS

Section 353.100 Purpose of this Part

This Part implements Public Act 88-359, Section 5 (codified at 820 ILCS 130/11b), an amendment to the Prevailing Wage Act [820 ILCS 130], that requires the Director of Labor (in a manner s/he deems appropriate) to investigate the alleged discharge, discipline, or discrimination against "whistleblowers" in violation of Section 11b(a) of the Act, and to take affirmative action to remedy such conduct, including but not limited to ordering the removal of any information contained in personnel files and the rehiring or reinstatement of whistleblowers with backpay.

Section 353.110 Definitions

DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

"Act" means the Prevailing Wage Act [820 ILCS 130].

"Application" means a signed and completed form (provided by the Director of the Illinois Department of Labor) requesting the Director of Labor to review a discharge, discipline or discrimination that allegedly violates Section 11b(a) of the Act.

"Authorized representative of employees" means an individual from a union or collective bargaining unit who exercises any rights afforded by the Act on behalf of him/herself or a member of the union or collective bargaining unit.

"Complainant" means an employee or an authorized representative of employees who believes that s/he has been discharged, disciplined, or discriminated against in violation of Section 11b(a) of the Act, and has filed an application with the Director of the Illinois Department of Labor.

"Day" means a calendar day.

"Department" means the Illinois Department of Labor.

"Director" means the Director of the Department or a duly authorized representative.

"Employee" means a laborer, worker, and/or mechanic covered by the Act.

"Party" means a Complainant or a Respondent.

"Person" means one or more individuals, partnerships, associations, corporations, business trusts, legal representatives, or any group of persons.

"Respondent" means any person who has allegedly violated Section 11b(a) of the Act.

SUBPART B: OBLIGATIONS AND PROHIBITED CONDUCT

Section 353.200 Obligations and Prohibited Conduct

No person shall discharge, discipline, or in any other way discriminate against, or cause to be discharged, disciplined, or discriminated against, any employee or any authorized representative of employees by reason of the fact that the employee or representative has filed, instituted, or caused to be filed or instituted any proceeding under this Act, or has testified or is about to testify in any proceeding resulting from the administration or enforcement of this Act, or offers any evidence of any violation of this Act. (Section

DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

11b(a) of the Act)

SUBPART C: ADMINISTRATION AND ENFORCEMENT

Section 353.300 Filing an Application

- a) An application may be filed by a Complainant, by his/her duly authorized representative, or by his/her attorney.
- b) An application shall be filed with the Director at the Department's Chicago or Springfield office.
- c) An application shall be filed within 30 days after the alleged discharge, discipline, or discrimination occurred.
- d) Filing requirements shall be construed to mean the Director's receipt of the application. The Complainant shall file his/her application by telephone facsimile, telegram, hand delivery, or next-day delivery service, or U.S. Mail. Proof that the filing was dispatched by the prescribed date shall be prima facie proof that the filing was timely received.

Section 353.310 Investigation

- a) Upon receipt of an application under this Part, the Director shall notify the Respondent of the existence of the application, and furnish the Respondent with a copy of the application to enable a reasonable response.
- b) The Respondent's response must be filed with the Director at the Department's Chicago office within 10 days after notification.
- c) The Director shall investigate and gather data concerning such case, and as part of the investigation may enter and inspect such places and records (and make copies thereof), may interview the Respondent and the Respondent's employees, and may require the production of any documentary or other evidence deemed necessary to determine whether prohibited conduct has occurred.
- d) The Director may issue an administrative subpoena to compel the attendance of a witness and/or the production of documents upon his/her determination that the information to be produced by a subpoena is necessary and relevant to his/her investigation, and that the Director cannot obtain the information by any other reasonable means.
- e) Investigations under this Part shall be conducted in a manner which protects the confidentiality of any person, other than the Complainant, who provides information on a confidential basis.

Section 353.320 Issuance of Decision

- a) The Director shall make findings of fact, including whether a violation of Section 11b(a) of the Act occurred. The Director shall issue his/her findings in a decision by certified mail to the parties.

DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

- b) If the Director finds that a violation did not occur, s/he shall issue a decision denying the application. The decision shall advise the Complainant that the findings of fact shall become the final order of the Director denying the application unless, within 15 days of its receipt, the Complainant files a request for a hearing on the application with the Director at the Department's Chicago office.
- c) If the Director finds that a violation has occurred, s/he shall issue a decision incorporating his/her findings and requiring the Respondent to take such affirmative action to remedy the conduct as the Director deems appropriate. The decision shall advise the Respondent that the findings of fact shall become the final order of the Director unless, within 15 days after its receipt, the Respondent files a request for a hearing on the application with the Director at the Department's Chicago office.
- d) The Director may, in his/her discretion, make a determination of no finding. The parties and the Director shall be in joint agreement that such finding is appropriate to the investigation and may be made to promote the effective resolution of the review requested.
- e) Filing requirements shall be construed to mean the Director's receipt of the request. The party requesting a hearing shall file by telephone facsimile, telegram, hand delivery, or next-day delivery service. Proof that the filing was dispatched by the prescribed date shall be prima facie proof that the filing was timely received.

Section 353.330 Request for Hearing

The request shall be prominently marked "REQUEST FOR HEARING" on both the letter and the envelope. The request must set forth the reasons why the party believes the Director misconstrued the evidence or misapplied the law to the facts, and any newly discovered evidence which the party could not have discovered during the Director's investigation. The party requesting a hearing shall serve copies of the request on the opposing party on the same day and in the same manner that the party files the request for the hearing with the Director.

Section 353.340 Hearings

Upon receipt of a properly filed "request for hearing", the Director shall convene an administrative hearing pursuant to the provisions of the Illinois Administrative Procedure Act [5 ILCS 100] and 68 Ill. Adm. Code 680.230.

Section 353.350 Judicial Review

A final order issued by the Director under Section 11b of the Act and this Part is subject to judicial review under the Administrative Review Law [735 ILCS 5/Art. 3].

DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED AMENDMENT(S)

1) Heading of the Part: Early Intervention Program

2) Code Citation: 59 Ill. Adm. Code 121

3) Section Number: Proposed Action:

121.30 Amended

121.66 Added

4) Statutory Authority: Implementing and authorized by Section 9 of the Early Intervention Services System Act [325 ILCS 20/9].

5) A Complete Description of the Subjects and Issues Involved: Part 121 is being amended to apply deemed status to community providers accredited by the Joint Commission on the Accreditation of Healthcare Organizations, the Council on Accreditation of Services for Families and Children, the Accreditation Council, the Commission on Accreditation of Rehabilitation Facilities and the National Accreditation Council for Agencies Serving the Blind and Visually Handicapped. Definitions of "accreditation" and "deemed status" have been added to Section 121.30. Section 121.66 has been added to clarify which Sections of Part 121 are eligible for deemed status and the method by which community agencies can demonstrate current accreditation status.

Various technical changes are also being made to this Part.

6) Will this proposed amendment replace an emergency rule currently in effect? No

7) Does this rulemaking contain an automatic repeal date? No

8) Does this proposed amendment contain incorporation by reference? This rulemaking incorporates by reference the standards of five accrediting organizations.

9) Are there any other proposed amendments pending on this Part? No

10) Statement of Statewide Policy Objectives: This rulemaking does not impact the State Mandates Act [30 ILCS 805].

11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Any interested person may submit comments, data, views or argument regarding this proposed rulemaking before the expiration of the first 45-day notice period. Submissions must be in writing and directed to:

Judith Hollenberg
Rules Administrator
Department of Mental Health and

DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED AMENDMENT(S)

Developmental Disabilities

401 Stratton Building

Springfield IL 62765

217/785-3313

FAX: 217/524-8920

12) Initial Regulatory Flexibility Analysis:

A) Types of small business affected: Community providers of early intervention programs.

B) Reporting, bookkeeping or other procedures required for compliance: None required.

C) Types of professional skills necessary for compliance: No special skills needed.

13) Regulatory Agenda on which this rulemaking was summarized: July 1996

The full text of the Proposed Amendment(s) begins on the next page.

DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED AMENDMENT(S)

TITLE 59: MENTAL HEALTH
CHAPTER I: DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

PART 121
EARLY INTERVENTION PROGRAM

SUBPART A: GENERAL PROVISIONS

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DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED AMENDMENT(S)

121.135	Conduct of hearings
121.140	Hearing officer's decision
121.145	Appeal to the Director
APPENDIX A	Utilization Guidelines

AUTHORITY: Implementing and authorized by Section 9 of the Early Intervention Services System Act [325 ILCS 20/9].

SOURCE: Adopted at 17 Ill. Reg. 4261, effective March 23, 1993; amended at 18 Ill. Reg. 15587, effective October 5, 1994; amended at 21 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL REQUIREMENTS

Section 121.30 Definitions

For the purpose of this Part, the following terms are defined:

"Accreditation." A process establishing that a program complies with nationally recognized standards of care as set by one of the following:

Outcome Based Performance Measures (Accreditation Council [Council], 100 West Road, Suite 406, Towson, Maryland 21204, 1993);

Standards Manual and Interpretive Guidelines for Behavioral Health or Standards Manual and Interpretive Guidelines for Employment and Community Support Services (Commission on Accreditation of Rehabilitation Facilities [CARF], 4891 East Grant Road, Tucson, Arizona 85711, 1996);

1997 Hospital Accreditation Standards (Joint Commission on Accreditation of Healthcare Organizations [JCAHO], One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996);

1997 Standards for Behavioral Health Care (Joint Commission on Accreditation of Healthcare Organizations [JCAHO], One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996);

Education Standards (National Accreditation Council for Agencies Serving the Blind and Visually Handicapped, 15 West 65th Street, New York, New York 10023, 1994); or

Standards for Agency Management and Service Delivery (Council on Accreditation of Services for Families and Children, Inc. [COA], 120 Wall Street, 11th Floor, New York, New York 10005, 1996).

DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED AMENDMENT(S)

"Advocacy." The process of speaking for, on behalf of, an individual, group, or cause especially when rights or interests are at risk.

"Appellant." The family or agency which requests a hearing.

"Assessment." The ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility under this Part to identify:

The child's strengths and unique needs;

The family's concerns, resources and priorities related to child development;

The nature and extent of early intervention services that are needed by the child and the child's family; and

The adjusted age level of the child's developmental skills.

"Authorized agency representative." A person appointed by the governing body who has responsibility for the provider's administration, including programmatic content and fiscal affairs.

"Center-based program." One in which early intervention service(s) are provided to children and/or families at a site owned or leased by the provider.

"Children and Family Services, Department of (DCFS)." The State agency in Illinois responsible for providing social services to children and their families, to operate children's institutions, and to provide certain other rehabilitative and residential services. ~~§§11-Rev--Stat--1991-CH--237-PAR--5001-ET-SEQ-7~~ [20 ILCS 505/1].

"Code." The Mental Health and Developmental Disabilities Code ~~§§11-Rev--Stat--1991-CH--91-1/27-PAR--1100-ET-SEQ-7~~ [405 ILCS 5/1-106].

"Confidentiality Act." The Mental Health and Developmental Disabilities Confidentiality Act ~~§§11-Rev--Stat--1991-CH--91-1/27-PAR--601-ET-SEQ-7~~ [740 ILCS 110/4].

"Coordinating/advocacy provider." Certified entity in local community area that coordinates early intervention services with other services needed by the family or child up to age 5. This entity provides staff support to the local interagency coordinating council and advocacy services for families of eligible children. This entity is described in Section 6 of the Early Intervention Services System Act ~~§§11-Rev--Stat--1991-CH--237-PAR--4156-7~~ [325 ILCS 20/6].

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"Day." A working day unless otherwise noted.

"Deemed status." If a provider has been accredited by an approved accrediting body as identified in the definition of "accreditation" in this Section, the Department shall deem the provider to be in substantial compliance with specific Sections of this Part. Deemed status, however, may be nullified by a finding by the Department that the provider is in substantial non-compliance with one or more of the designated Sections.

"Department." The Department of Mental Health and Developmental Disabilities or successor agency.

"Developmental delay." One in which a child is experiencing a delay in one or more of the following areas of childhood development as measured by appropriate diagnostic instruments and standard procedures: cognitive; physical, including vision and hearing; language, speech and communication; psycho-social; or self-help skills (Section 3 of the Early Intervention Services System Act ~~§§11-Rev--Stat--1991-CH--237-PAR--4153~~ [325 ILCS 20/31]).

"Developmental disability." Disability which is attributable to mental retardation, cerebral palsy, epilepsy or autism; or to any other condition which results in impairment similar to that caused by mental retardation and which requires services similar to those required by ~~mentally-retarded--individuals~~ individuals with mental retardation. Such disability must originate before the age of 18 years, be expected to continue indefinitely, and constitute a substantial handicap (Section 1-106 of the Code ~~--§§11-Rev--Stat--1991-CH--91-1/27-PAR--1106-7~~ [405 ILCS 5/1-106]).

"Developmental services." Consists of a wide range of services provided to a child and his or her family which are designed to enhance the child's development and promote his or her maximum level of functioning.

"Director." The Director of the Department.

"Early intervention." Consists of a wide range of services (as described in Section 121.100 of this Part) provided for children from birth to 36 months old with a developmental disability, developmental delay or high probability of developmental delay and their families. Early intervention programs are designed to improve child development, minimize potential delays, remediate existing problems, prevent further deterioration, limit the development of additional disabling conditions, and/or promote adaptive family functioning. The goals of early intervention are accomplished by providing developmental and therapeutic services to children and supportive services for their

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families.

"Early intervention aide." A person who has had training (as specified in Section 121.45(c) of this Part) that enables him or her to work with children and their family members, and provide services as an assistant to and under the supervision of an early intervention specialist. This person must have a minimum of one year supervised experience in the field of mental retardation or human services providing direct services.

"Early intervention program." Services as defined in this Part by a provider under a contractual agreement with the Department.

"Early intervention specialist." A person who meets the qualifications of a qualified mental retardation professional (QMRP) as defined in this Section. This person shall have a background in child development and shall be responsible for planning, coordinating and providing early intervention services to children and their families and supervising activities of early intervention aides.

"Evaluation." Process used by appropriate qualified personnel to determine a child's initial and continuing eligibility, including determining the child's status in each of the developmental areas specified in Section 121.90(d)(1) of this Part.

"Family." The parent or parent substitute, as defined by this Section, sister and brother of a child.

"Frequency and duration." Frequency means the number of days or sessions that a service will be provided and duration means the length of time the service is provided during each session.

"Governing body." The policy-making authority of a provider that establishes policies concerning the provider's operation and the welfare of individuals; provides for the provider's administration by appointing an authorized agency representative to implement its policies; and exercises general oversight of the provider's operation, its fiscal affairs and programmatic content to implement the provider's mission.

"Guardian." The court-appointed guardian or conservator of the person under the Probate Act of 1975 (4311-Rev-Stat-1991-CH-110-1/27-Par-1-1-et-seq) [755 ILCS 5/1-1] or a temporary custodian or guardian of the person of a child appointed by an Illinois juvenile court or a legally-appointed guardian or custodian or other party granted legal care, custody and control over a minor child by a juvenile court of competent jurisdiction located in another state whose jurisdiction has been extended into Illinois via the child's legally authorized

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placement according to the applicable interstate compact (the the Juvenile Court Act of 1987 (4311-Rev-Stat-1991-CH-37-Par-001-1 et-seq) [705 ILCS 405/1-1]; Interstate Compact on the Placement of Children (4311-Rev-Stat-1991-CH-237-Par-2601-et-seq) [45 ILCS 15/1]).

"Hearing officer." The person appointed by the Director to preside at the formal administrative hearing.

"High probability of developmental delay." A Means--a physical or mental condition that meets one of the following:

A diagnosed medical disorder bearing a relatively well-known expectancy for developmental outcomes within varying ranges of developmental disabilities; or

A history of prenatal, perinatal, neonatal or early developmental events suggestive of biological insults to the developing central nervous system and which either singly or collectively increase the probability of developing a disability or delay based on a medical history [Section 3 of the Early Intervention Services Systems Act (4311-Rev-Stat-1991-CH-237-Par-4153) [325 ILCS 20/3]].

"Individualized family service plan (IFSP)." Written plan developed by the transdisciplinary or interdisciplinary team. It contains a statement of the child's present levels of cognitive, physical (including vision and hearing), communication (including receptive and expressive language skills), and social or emotional development and adaptive skills based on acceptable objective criteria.

"Interdisciplinary process." The process in which different disciplines perform assessments and implement services in their discipline areas but work from an IFSP jointly developed with the parent or parent substitute.

"Local interagency coordinating council (local ICC)." Advisory body to the early intervention program responsible for local community needs assessments, planning, developing recommendations for local program development, and conflict resolution. The local ICC is composed of parents, representatives from the coordinating/advocacy provider, the regional diagnostic services, local early intervention agencies, and local state agency staff. The local ICC is described in Section 6 of the Early Intervention Services System Act.

"Natural environment." A place where children without disabilities would normally participate in developmentally and age-appropriate activities (includes home, day care, preschool, nursery school and

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recreation programs).

"Parent or parent substitute." A person acting in the capacity of a parent with respect to a child. The parent substitute shall be:

The legal guardian, if a legal guardian has been determined;

The natural or adoptive parent, if no legal guardian has been determined;

A person licensed as a foster parent and providing care under the Child Care Act of 1969 (1991-Rev-Stat--1991-CH-237-PAR-2311-ET-SEQ-) [225 ILCS 10/4];

A surrogate parent appointed by the Illinois State Board of Education; or

Another relative who is 21 years old or older who has a parent-like relationship with the child and who wishes to serve as the parent substitute. This relative shall be considered the parent for purposes of this Part if there is no objection from:

The legal guardian, if a legal guardian has been determined; or

The natural or adoptive parent, if no legal guardian has been determined.

"Physician." A physician licensed under the Medical Practice Act of 1987 (1991-Rev-Stat--1991-CH-1117-PAR-4400-I-ET-SEQ-) [225 ILCS 60/4].

"Provider." An agency having a contract with the Department for the provision of early intervention services in accordance with this Part.

"Public Aid, Department of (DPA)." The State agency in Illinois responsible for administering the federal Medicaid program and other federal and State public assistance programs.

"Quality assurance." A systematic and objective approach to monitoring and evaluating the appropriateness, adequacy and quality of services in order to identify and resolve problems.

"Qualified mental retardation professional (QMRP)." - A QMRP must have at least one year of experience working directly with individuals with mental retardation or other developmental disabilities and be one of the following:

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A doctor of medicine or osteopathy licensed pursuant to the Medical Practice Act of 1987;

A registered nurse licensed pursuant to the The Illinois Nursing Act of 1987 (1991-Rev-Stat--1991-CH-1117-PAR-3501-ET-SEQ-) [225 ILCS 65/4];

An occupational therapist or occupational therapist assistant certified by the American Occupational Therapy Association (Illinois Occupational Therapy Practice Act (1991-Rev-Stat--1991-CH-1117-PAR-3701-ET-SEQ-) [225 ILCS 75/4]);

A physical therapist certified by the American Physical Therapy Association (Illinois Physical Therapy Act (1991-Rev-Stat--1991-CH-1117-PAR-4251-ET-SEQ-) [225 ILCS 90/4]);

A physical therapist assistant registered by the American Physical Therapy Association or a graduate of a two-year college-level program approved by the American Physical Therapy Association;

An individual with at least a master's degree in psychology from an accredited school (Clinical Psychologist Licensing Act [225 ILCS 151]);

A social worker with a bachelor's degree from a college or university or graduate degree from a school of social work accredited or approved by the Council on Social Work Education or another comparable body (the Clinical Social Work and Social Work Practice Act (1991-Rev-Stat--1991-CH-1117-PAR-6331-ET-SEQ-) [225 ILCS 20/4]);

A speech-language pathologist or audiologist with a certificate of Clinical Competence in Speech-Language Pathology or Audiology granted by the American Speech Language Hearing Association or comparable body or who has met the education requirements for licensure and is in the process of accumulating the supervised experience required for licensure (the Illinois Speech-Language Pathology and Audiology Practice Act (1991-Rev-Stat--1991-CH-1117-PAR-7901-ET-SEQ-) [225 ILCS 110/4]);

A professional recreation staff person with a bachelor's degree in recreation or in a specialty area such as art, dance, music or physical therapy;

A professional dietitian registered by the American Dietetics Association; or

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A human services professional with a bachelor's degree in a human services field, including but not limited to, sociology, education, rehabilitation counseling or psychology.

"Respondent." The agency, person or division of the Department that made the decision being appealed.

"Service facilitation." The activities carried out to assist and enable eligible children and their families to receive the rights, procedural safeguards and services that have been chosen by the family and are authorized to be provided.

"Site." A discrete building that is owned, leased by, or loaned to a provider for the purpose of providing early intervention services.

"State Board of Education." The State **state** agency responsible for setting policies and guidelines for public and private schools and appointing surrogate parents for children ages 0 to 21 and for acting as the lead **State state** agency on early intervention.

"Third party." Any individual, institution, corporation, public or private agency which is or may be responsible (liable) for paying all or part of the costs of early intervention services provided to a child or family. One example is insurance.

"Transdisciplinary or interdisciplinary team." A group consisting of the parent or parent substitute, staff providing service facilitation, and representatives of disciplines and services necessary to identify the child's and family's needs and to design services and alternatives to meet them. At least one member of the team shall be an early intervention specialist. The process in which the team works together determines if the team is a transdisciplinary or interdisciplinary team.

"Transdisciplinary process." The process in which different disciplines work together with the parent or parent substitute to assess, plan and implement services by participating in mutual sharing of information and decision making. The process ensures the crossing of traditional disciplinary boundaries by role extension, exchange, release and support.

"Transition." A process designed to facilitate the movement from early intervention services or programs to appropriate early childhood programs that serve children 3-5 years of age or to other community service agencies.

"Utilization review." A process by which the provider regularly assesses, on a sample basis, the appropriateness of provider processes

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and outcomes related to services provided to children and their families.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

SUBPART B: PROVIDER REQUIREMENTS

Section 121.66 Accreditation

a) Providers demonstrating current accreditation status under any of the standards of the accrediting organizations identified in the definition of "accreditation" in Section 121.30 of this Part shall be granted deemed status for the following Sections of this Part:

- 1) Section 121.20;
- 2) Section 121.35(d) and (g);
- 3) Section 121.45(a) through (d);
- 4) Section 121.55(a) through (c), (e), (g) and (i);
- 5) Section 121.60;
- 6) Section 121.70;
- 7) Section 121.75;
- 8) Section 121.80;
- 9) Section 121.90;
- 10) Section 121.95;
- 11) Section 121.105(b), (e) through (g); and
- 12) Section 121.115.

b) Demonstration of current accreditation status shall be achieved by submission of a certificate of accreditation and the most recent accreditation report by the provider to the Department.

c) If the provider's accreditation status changes for any reason, the provider shall notify the Department of that change within 30 days after the effective date of the change.

(Source: Added at 21 Ill. Reg. _____, effective _____)

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- 1) Heading of the Part: Grants
- 2) Code Citation: 59 Ill. Adm. Code 103
- 3) Section Number: Proposed Action:
103.11 Amended
103.165 Amended
- 4) Statutory Authority: Implementing Sections 15, 34 and 34.1 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/15, 34 and 34.1] and the Community Services Act [405 ILCS 30] and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104] and Section 5 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/5].
- 5) A Complete Description of the Subjects and Issues Involved: Part 103 is being amended to apply deemed status to community providers accredited by the Joint Commission on the Accreditation of Healthcare Organizations, the Council on Accreditation of Services for Families and Children, the Accreditation Council, the Commission on Accreditation of Rehabilitation Facilities and the National Accreditation Council for Agencies Serving the Blind and Visually Handicapped. A definition of "deemed status" has been added to Section 103.11. Section 103.165 has been amended to clarify which Sections of Part 103 are eligible for deemed status and the method by which community agencies can demonstrate current accreditation status.

Various technical changes are also being made.

- 6) Will this proposed amendment replace an emergency rule currently in effect? No
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this proposed amendment contain incorporation by reference? This rulemaking incorporates by reference the standards of five accrediting organizations.
- 9) Are there any other proposed amendments pending on this Part? No
- 10) Statement of Statewide Policy Objectives: This rulemaking does not impact the State Mandates Act [30 ILCS 805].

11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Any interested person may submit comments, data, views or argument regarding this proposed rulemaking before the expiration of the first 45-day notice period. Submissions must be in writing and directed to:

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Judith Hollenberg
Rules Administrator
Department of Mental Health
and Developmental Disabilities
401 Stratton Building
Springfield IL 62765
Telephone (217)785-3313
FAX (217)524-8920

- 12) Initial Regulatory Flexibility Analysis:
A) Types of small business affected: Community providers of services to individuals with mental illness and/or developmental disabilities.
B) Reporting, bookkeeping or other procedures required for compliance: None required.
C) Types of professional skills necessary for compliance: No special skills needed.

- 13) Regulatory Agenda on which this rulemaking was summarized: July 1996

The full text of the Proposed Amendment(s) begins on the next page.

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TITLE 59: MENTAL HEALTH
CHAPTER I: DEPARTMENT OF MENTAL HEALTH
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PART 103
GRANTS

SUBPART A: SYSTEM DESIGN

- Section 103.10 Purpose
- 103.11 Definitions
- 103.15 Incorporation by reference
- 103.20 Geographic service area
- 103.25 Agency governance
- 103.30 Conflict of interest
- 103.40 Community operation of programs (Repealed)
- 103.50 General program requirements
- 103.60 Fiscal management
- 103.65 Programs eligible for grants
- 103.70 Special organizational structures
- 103.80 Monitoring and evaluation

SUBPART B: OPERATIONAL PROCEDURES

- Section 103.90 Fiscal requirements
- 103.95 Grant negotiation process
- 103.100 Accounting requirements
- 103.110 Allowable/non-allowable expenses
- 103.120 Audits
- 103.130 Department review and hearing process
- 103.140 Budget application (Repealed)
- 103.150 Agency plan
- 103.160 Grant agreement and addenda
- 103.165 Accreditation
- 103.170 Agency plan compliance
- 103.180 Prerequisites for disbursement of funds
- 103.190 Interruption of disbursement and grant cancellation
- 103.200 Revenue/expense reports (Repealed)
- 103.210 Reallocation and lapsed funds

AUTHORITY: Implementing Sections 15, 34 and 34.1 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/15, 34 and 34.1] and the Community Services Act [405 ILCS 30] and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104] and Section 5 of the Department of Mental Health and Developmental Disabilities Act

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[20 ILCS 1705/5].

SOURCE: Emergency rule adopted and codified at 6 Ill. Reg. 9361, effective July 21, 1982, for a maximum of 150 days; emergency expired December 19, 1982; adopted at 7 Ill. Reg. 1788, effective February 2, 1983; amended at 7 Ill. Reg. 9304, effective July 27, 1983; amended at 10 Ill. Reg. 10572, effective June 1, 1986; amended at 10 Ill. Reg. 10568, effective September 1, 1986; emergency amendment at 16 Ill. Reg. 2643, effective February 1, 1992, for a maximum of 150 days; emergency expired on June 30, 1992; amended at 17 Ill. Reg. 10282, effective July 1, 1993; amended at 21 Ill. Reg. _____, effective _____.

SUBPART A: SYSTEM DESIGN

Section 103.11 Definitions

For the purpose of this Part, the following terms are defined:

"Accreditation." A process establishing that a program complies with nationally recognized standards of care as set by one of the following:

1997 Hospital Accreditation Standards Manual-for-Hospitals (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996 ~~1993~~);

Standards for Agency Management and Service Delivery Manual-on Agency-Accreditation (Council on Accreditation of Services for Families and Children (COA), 120 Wall Street, 11th Floor, 520 Eighth-Avenue, Suite-2202B, New York, New York 10005 ~~10018~~, 1996 ~~1992~~);

1997 Mental-Health Standards for Behavioral Healthcare (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996 ~~1993~~);

Outcome Based Performance Measures Standards-for-Services-for People-with-Developmental-Disabilities (Accreditation Council for Services for Developmentally Disabled Persons (Council), 8100 Professional Place, Suite 204, Landover, Maryland 20785, 1990);

Standards Manual and Interpretive Guidelines for Behavioral Health or Standards Manual and Interpretive Guidelines for Employment and Community Support Services Standards-Manual-for Organizations-Serving-People-with-Disabilities (Commission on

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Accreditation of Rehabilitation Facilities (CARF), 4891 East Grant Road 101-North-Wilmot--Road, Tucson Tucson, Arizona 85711, 1996 July-17-1992).

Education Standards (National Accreditation Council for Agencies Serving the Blind and Visually Handicapped, 15 West 65th Street, New York, New York 10023, 1994).

"Agency plan." A part of the grant agreement which identifies the services to be provided, the target population and the geographic areas to be served. It identifies how the services will be financed and through what budget items and funding sources.

"Authorized agency representative." The administrative head of an agency appointed by the agency's governing body with overall responsibility for fiscal and programmatic management.

"Code." The Mental Health and Developmental Disabilities Code (441 Rev--Stat--1991--ch--91-1-72, par--1-100-et-seq-) (405 ILCS 5).

"Community agency" or "agency." Local government or not-for-profit corporation under contract with the Department to provide services.

"Confidentiality Act." The Mental Health and Developmental Disabilities Confidentiality Act (441 Rev--Stat--1991--ch--91-1-72 par--801-et-seq-) [740 ILCS 110].

"Control." For a not-for-profit corporation, control is indicated if current members of the governing body (or staff) of the agency comprise 50 percent or more of the governing body of the controlled entity or the governing body of the agency can select 50 percent or more of the controlled entity, or any combination of seats and selection that results in influencing 50 percent or more of the seats of the controlled entity. For a for-profit corporation, control is indicated if the agency owns or controls, by options or trust, 50 percent or more of the voting stock of the corporation, or has control over the selection of over 50 percent of the governing body of the for-profit corporation, or the hiring of its management. For a partnership, control is being a general partner in a limited partnership, or being a partner with more than 50 percent of the invested equity in a general partnership. For a sole proprietorship, control exists if the proprietor is a full or part-time employee of the grantee.

"Controlled entity." Any corporation, partnership or sole proprietorship that is controlled by the agency's governing body.

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"Day mode." An administrative designation quantifying service activities which are delivered during any substantial and regularly scheduled portion of a specific 24-hour time period.

"Days." Calendar days unless otherwise specified.

"Department." The Department of Mental Health and Developmental Disabilities or successor agency.

"Deemed status." If an agency has been accredited by an approved accrediting body as identified in the definition of "accreditation" in this Section, the Department shall deem the agency to be in compliance with specific Sections of this Part. Deemed status, however, may be nullified by a finding by the Department that the agency is in substantial non-compliance with one or more of the designated Sections.

"Director." The Director of the Department of--Mental--Health--and Developmental--Disabilities.

"Event mode." An administrative designation quantifying service activities which are delivered in short, time-limited segments.

"Fair market value." The prevailing rate at which similar business is contracted in the agency's community, including the following specific criteria:

Fair market rent means up to plus 10 percent from the average of two estimates of appropriate rental costs from two local appraisers, which the agency is responsible for securing. If the appropriate rental cost is unclear, the Department and the agency shall establish a fair and appropriate fee.

Fair market fees for personnel means, whenever possible, the like prevailing rates in the community on a per day or per hour basis.

"Geographic service area." A geographic division for the purpose of providing locally-operated networks of services. The Department's programs are funded through a structure of service areas.

"Governing body." The policy-making authority of an agency which establishes policies concerning the agency's operation and the welfare of individuals; provides for the agency's administration by appointing an authorized agency representative to implement its policies, and exercises general oversight of the agency's operation, its fiscal affairs and programmatic content to implement the agency's mission.

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"Grant agreement." When fully executed, the obligating instrument providing the basis for Departmental financial participation in grant-in-aid programs, and which formalizes the contractual relationship between the Department and the agency indicating the amount of Department funds which will be paid to the agency for the provision of services as described in the grant agreement and the agency plan.

"Individual" or "individuals." A person or persons who receives or receive mental health or developmental disability services.

"Lapse." Grant funds not expended at the expiration of the grant agreement, due to allowable expenses not meeting revenue for Department grant funds awarded, by program.

"Lapse notice." A notification that the Department has determined potential lapsed funds, when the Department revenue by program exceeds allowable expense, by Department-funded program.

"Linkage." Person-to-person contact to assure that the supports and services needed by the individual and specified in the individual services plan are obtained. The qualified mental retardation professional, qualified mental health professional or staff under their supervision shall be responsible for assuring linkage.

"Medicaid." Medical assistance issued by the Illinois Department of Public Aid under the provisions of Title XIX of the Social Security Act (42 U.S.C.A. 1396 et seq. (1995 1992)), for eligible recipients including Aid to the Aged, Blind and Disabled (AABD), Aid to Families with Dependent Children (AFDC), Medical Assistance No Grant (MANG), Refugee Repatriate Program (RRP) recipients, as well as Title XIX eligible Department of Children and Family Services (DCFS) wards.

"Network of services." A network which is developed and maintained by service providers, community residents (including consumers and consumer representatives), mental health authorities and the Department (including State-operated facilities), and which is planned, organized and coordinated for the delivery of mental disabilities services. Such a network will emphasize continuity, accessibility, appropriateness and comprehensiveness.

"Operating fund." A term inclusive of funds an agency may have in its accounting records, except those in a capital fund(s).

"Performance indicator." A qualitative and/or quantitative measure that can be included in the assessment of how well the mental health and developmental disabilities service system is functioning; in

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evaluating both outcomes and system processes; and in assessing all levels of the system, including the system as a whole, the geographic service area, the agency, the State-operated facility, and the individual receiving mental health or developmental disabilities services.

"Preliminary evaluation." The use of a system to evaluate the physical, social, developmental, behavioral and psychosocial aspects of an individual.

"Redistribution." A change in the distribution of the agency's total award between two or more individual program awards, involving an intra-agency transfer of funds; therefore, the increases to individual programs are always balanced by the decreases to other programs, but not changing the agency total.

"Reduction." A decrease in the level of funding to a program currently receiving grant funds as well as a decrease to the agency total.

"Residential mode." An administrative designation quantifying service activities which are delivered in a specified living environment.

"Services" or "mental health or developmental disability services." Any treatment or habilitation events or products as contracted for through the grant agreement and as specified in the agency plan.

"Supplemental." For a program currently receiving grant funds, a supplemental represents an increase to both the individual program award and the agency total. For a new program, a supplemental represents both the addition of a specific program award, and an increase to the agency total.

"Umbrella agencies." Those organizations which have overall legal, administrative, planning, and funding responsibility for delivery of services in more than one geographic service area.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

SUBPART B: OPERATIONAL PROCEDURES

Section 103.165 Accreditation

- a) Agencies Providers demonstrating current accreditation status under any of the standards of the accrediting organizations identified in the definition of "accreditation" in Section 103.11 of this Part

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~~either the Standards for Services for People with Developmental Disabilities (Council), Standards Manual for Organizations Serving People with Disabilities (CARP), Council on Accreditation of Service for Families and Children (COA), Consolidated Standards Manual (CAH9), or the Accreditation Manual for Hospitals (JCAH9)~~ shall be deemed to be in compliance with Sections 103.25 and 103.60 of this Part.

- b) Demonstration of current accreditation status shall be achieved by submission of a certificate statement of accreditation and most recent accreditation report by the agency to the Department as part of the submission of the agency plan.
- c) If the agency's accreditation status changes for any reason, the agency shall notify the Department of that change within 30 days after the effective date following the change.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

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- 1) Heading of the Part: Medicaid Community Mental Health Services Program
- 2) Code Citation: 59 Ill. Adm. Code 132
- 3) Section Number: Proposed Action:
132.91 Added
- 4) Statutory Authority: Implementing and authorized by the Community Services Act [405 ILCS 30] and Section 15.3 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/15.3].

5) A Complete Description of the Subjects and Issues Involved: Section 132.91 is being added to Part 132 to apply deemed status to community providers accredited by the Joint Commission on the Accreditation of Healthcare Organizations, the Council on Accreditation of Services for Families and Children, the Accreditation Council and the Commission on Accreditation of Rehabilitation Facilities. Section 132.91 defines "deemed status", identifies the standards of these accrediting bodies, clarifies which Sections of Part 132 are eligible for deemed status and the method by which community agencies can demonstrate current accreditation status.

The Department has elected to amend Part 132 in a slightly different manner than Parts 103, 113, 115, 119 and 121 which appear elsewhere in this issue of the *Illinois Register* because the Department anticipates additional rulemaking on this Part, involving the definitions Section (Section 132.25), in the near future and did not wish to delay this "deemed status" rulemaking until these additional amendments were ready for proposal. When these additional amendments are proposed, the Department will add definitions of "accreditation" and "deemed status" to Section 132.25.

Various technical changes are also being made to this Part.

- 6) Will this proposed amendment replace an emergency rule currently in effect? No
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this proposed amendment contain incorporation by reference? This rulemaking incorporates by reference the standards of four accrediting organizations.
- 9) Are there any other proposed amendments pending on this Part? No
- 10) Statement of Statewide Policy Objectives: This rulemaking does not impact the State Mandates Act [30 ILCS 805].

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- 11) Time, place and manner in which interested persons may comment on this proposed rulemaking: Any interested person may submit comments, data, views or argument regarding this proposed rulemaking before the expiration of the first 45-day notice period. Submissions must be in writing and directed to:

Judith Hollenberg
Rules Administrator
Department of Mental Health
and Developmental Disabilities
Telephone (217)785-3313
FAX (217)524-8920

- 12) Initial Regulatory Flexibility Analysis:

A) Types of small business affected: Community providers of Medicaid community mental health services programs.

B) Reporting, bookkeeping or other procedures required for compliance: None required.

C) Types of professional skills necessary for compliance: No special skills needed.

- 13) Regulatory Agenda on which this rulemaking was summarized: July 1996

The full text of the Proposed Amendment(s) begins on the next page.

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AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED AMENDMENTS

TITLE 59: MENTAL HEALTH
CHAPTER I: DEPARTMENT OF MENTAL HEALTH
AND DEVELOPMENTAL DISABILITIES

PART 132

MEDICAID COMMUNITY MENTAL
HEALTH SERVICES PROGRAM

SUBPART A: GENERAL PROVISIONS

Section	Purpose	
132.10	Incorporation by reference	
132.15	Clients' rights and confidentiality	
132.20	Definitions	
132.25	Application and certification process	
132.30	Recertification and reviews	
132.35	Certification for additional Medicaid services and/or new site(s)	community mental health
132.40	Suspension of certification	
132.45	Termination of certification	
132.50	Certification appeal criteria and process	
132.55	Rate setting	
132.60		

SUBPART B: PROVIDER ADMINISTRATIVE REQUIREMENTS

Section	Purpose	
132.65	Organizational structure	
132.70	Personnel and administrative recordkeeping	
132.75	Program evaluation	
132.80	Fiscal and statistical	
132.85	Recordkeeping	
132.90	Provider site(s)	
<u>132.91</u>	<u>Accreditation</u>	

SUBPART C: UTILIZATION REVIEW AND CONTINUITY OF SERVICES

Section	Purpose	
132.95	Utilization review	
132.100	Clinical records	
132.105	Continuity and coordination of services	
132.110	Availability of services (Repealed)	

SUBPART D: CLINIC SERVICES

Section	Purpose	
132.115	Provisions	

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132.120 Service needs evaluation
132.125 Treatment plan development and modification
132.130 Psychiatric treatment
132.135 Crisis intervention
132.140 Day treatment

SUBPART E: REHABILITATIVE SERVICES

Section
132.145 Provisions
132.150 Rehabilitative mental health services
132.155 Family intervention, stabilization and reunification services

SUBPART F: CASE MANAGEMENT SERVICES

Section
132.160 Provisions
132.165 Mental health case management services
132.170 Rehabilitative case management

APPENDIX A Medicaid Community Mental Health Services Application Components

APPENDIX B Utilization Parameters

TABLE A Mental Health Clinic Program Client Services

TABLE B Rehabilitative Mental Health Services

TABLE C Family Intervention, Stabilization and Reunification Services

AUTHORITY: Implementing and authorized by the Community Services Act [405 ILCS 30] and Section 15.3 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/15.3].

SOURCE: Emergency rules adopted at 16 Ill. Reg. 211, effective December 31, 1991, for a maximum of 150 days; new rules adopted at 16 Ill. Reg. 9006, effective May 29, 1992; amended at 18 Ill. Reg. 15593, effective October 5, 1994; emergency amendment at 19 Ill. Reg. 9200, effective July 1, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 16178, effective November 28, 1995; amended at 21 Ill. Reg. _____, effective _____.

SUBPART B: PROVIDER ADMINISTRATIVE REQUIREMENTS

Section 132.91 Accreditation

a) The Department shall grant deemed status to providers having a contract with the Department and demonstrating current accreditation status under any of the standards of the following accrediting organizations:

1) 1997 Hospital Accreditation Standards (Joint Commission on

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Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996);
2) Standards for Agency Management and Service Delivery (Council on Accreditation of Services for Families and Children (COA), 120 Wall Street, 11th Floor, New York, New York 10005, 1996);
3) 1997 Standards for Behavioral Health Care (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996);
4) Outcome Based Performance Measures (Accreditation Council (Council), 100 West Road, Suite 406, Towson, Maryland 21204, 1993); or
5) Standards Manual and Interpretive Guidelines for Behavioral Health or Standards Manual and Interpretive Guidelines for Employment and Community Support Services (Commission on Accreditation of Rehabilitation Facilities (CARF), 4891 East Grant Road, Tucson, Arizona 85711, 1996).

b) "Deemed status" means that if a provider has been accredited by any of the accrediting organizations identified in subsections (a)(1) through (a)(5) of this Section, the Department shall deem the provider to be in substantial compliance for the programs the Department funds for the following Sections of this Part:

- 1) Section 132.65;
- 2) Section 132.70;
- 3) Section 132.75;
- 4) Section 132.85(a)(1), (b), (d)(3) through (d)(5) and (e);
- 5) Section 132.95 (a) and (d) through (f) and (h);
- 6) Section 132.100(a) through (g) and (i) through (l); and
- 7) Section 132.105.

c) Demonstration of current accreditation status shall be achieved by submission of a certificate of accreditation and the most recent accreditation report by the provider to the Department.

d) If the provider's accreditation status changes for any reason, the provider shall notify the Department of that change within 30 days after the effective date the change.

e) Deemed status may be nullified by a finding by the Department that the provider is in substantial non-compliance with one or more of the Sections identified in subsections (b)(1) through (b)(7) of this Section.

(Source: Added at 21 Ill. Reg. _____, effective _____, effective _____)

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NOTICE OF PROPOSED AMENDMENT(S)

- 1) Heading of the Part: Minimum Standards for Certification of Developmental Training Programs

2) Code Citation: 59 Ill. Adm. Code 119

3) Section Number: Proposed Action:
119.120 Amended
119.210 Amended
119.270 Added
119.305 Amended

- 4) Statutory Authority: Implementing and authorized by Section 15.2 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/15.2].

5) A Complete Description of the Subjects and Issues Involved: Part 119 is being amended to apply deemed status to community providers accredited by the Joint Commission on the Accreditation of Healthcare Organizations, the Council on Accreditation of Services for Families and Children, the Accreditation Council, the Commission on Accreditation of Rehabilitation Facilities and the National Accreditation Council for Agencies Serving the Blind and Visually Handicapped. A definition of "deemed status" has been added to Section 119.120. Section 119.270 has been added to clarify which Sections of Part 119 are eligible for deemed status and the method by which community agencies can demonstrate current accreditation status. Section 119.210 is being amended to correct an inconsistency with a time frame in Section 119.235 of this Part. Section 119.305 is being amended to correct the address of the Department's Office of Accreditation and Licensure.

Various technical changes are also being made to this Part.

- 6) Will this proposed amendment replace an emergency rule currently in effect? No

- 7) Does this rulemaking contain an automatic repeal date? No

- 8) Does this proposed amendment contain incorporation by reference? This rulemaking incorporates by reference the standards of five accrediting organizations.

- 9) Are there any other proposed amendments pending on this Part? Yes

<u>Section Numbers</u>	<u>Proposed Action</u>	<u>IL Register Citation</u>
119.261	New Section	20 Ill. Reg. 16016
119.330	Amended	20 Ill. Reg. 13492

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- 10) Statement of Statewide Policy Objectives: This rulemaking does not impact the State Mandates Act [30 ILCS 805].

11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Any interested person may submit comments, data, views or argument regarding this proposed rulemaking before the expiration of the first 45-day notice period. Submissions must be in writing and directed to:

Judith Hollenberg
Rules Administrator
Department of Mental Health
and Developmental Disabilities
401 Stratton Building
Springfield IL 62765
Telephone (217)785-3313
FAX (217)524-8920

- 12) Initial Regulatory Flexibility Analysis:

A) Types of small business affected: Private agencies which operate developmental training programs certified by the Department.

B) Reporting, bookkeeping or other procedures required for compliance: None required.

C) Types of professional skills necessary for compliance: No special skills needed.

- 13) Regulatory Agenda on which this rulemaking was summarized: July 1996

The full text of the Proposed Amendment(s) begins on the next page.

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NOTICE OF PROPOSED AMENDMENT(S)

TITLE 59: MENTAL HEALTH
CHAPTER I: DEPARTMENT OF MENTAL HEALTH AND
DEVELOPMENTAL DISABILITIES

PART 119
MINIMUM STANDARDS FOR CERTIFICATION OF DEVELOPMENTAL TRAINING PROGRAMS

SUBPART A: GENERAL PROVISIONS

Section

119.100 Applicability
119.110 Incorporation by reference
119.120 Definitions

SUBPART B: PROGRAM REQUIREMENTS

Section

119.200 General requirements
119.205 Criteria for participation of individuals
119.210 Exclusion, suspension or discharge of an individual
119.215 Program staff
119.220 Interdisciplinary team (team)
119.225 Assessment of individuals
119.230 Individual services plan (plan)
119.235 Individual rights and confidentiality
119.240 Special training procedures
119.245 Committees
119.250 Medications and medical care
119.255 Environmental management
119.260 Administrative requirements
119.270 Accreditation

SUBPART C: CERTIFICATION REQUIREMENTS

Section

119.300 Issuing a certificate and period of certification
119.305 Application for certification
119.310 Application acceptance and verification
119.315 Non-transferability of a certificate
119.320 Cessation of operations
119.325 Certificate denial
119.330 Hearings

AUTHORITY: Implementing and authorized by Section 15.2 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/15.2].

SOURCE: Adopted at 14 Ill. Reg. 1727, effective October 9, 1990; emergency

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amendment at 16 Ill. Reg. 2662, effective February 1, 1992, for a maximum of 150 days; emergency expired June 30, 1992; amended at 21 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL PROVISIONS

Section 119.120 Definitions

For the purposes of this Part, the following terms are defined:

"Abuse." *Any physical injury, sexual abuse or mental injury inflicted on an individual an individual other than by accidental means.* (Section 1-101.1 of the Code)

Physical injury includes all injuries serious enough to require immediate medical treatment by a physician, such as fractures and lacerations which require suturing and all other injuries which because of the circumstances or nature of the injury indicate possible abuse or neglect;

Sexual abuse includes but is not limited to any sexual penetration or sexual conduct between an individual and another person if the individual has been adjudicated legally disabled, or has a guardian, or is unable to understand the nature of the act or is unable to give knowing consent, or is injured, or alleges that there is, or there is evidence of use of force, coercion, or the exchange of money or anything of value; and

Mental injury includes use of words, signs, gestures or other actions by anyone against an individual which intimidates, demeans, harasses, causes emotional anguish or distress, ridicules, threatens, harms or will knowingly incite or precipitate maladaptive behavior on the part of an individual. Mental injury also includes exploitation, which is any act that uses individuals, their resources or their possessions for an agency employee's personal gain or for an agency's benefit.

"Accreditation." A process establishing that a program complies with nationally-recognized standards of care as set by one of the following:

Outcome Based Performance Measures Standards-for-Services-for People-with-Developmental-Disabilities (Accreditation Council for Services-for-Developmentally-Disabled-Persons (AEDB Council), 100 West Road, Suite 406, Towson, Maryland 21204, 1993 8480 Professional Place, Suite-204, Bandover, Maryland-20785-1909);

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Standards Manual and Interpretive Guidelines for Behavioral Health or Standards Manual and Interpretive Guidelines for Employment and Community Support Services ~~for Organizations Serving People with Disabilities~~ (Commission on Accreditation of Rehabilitation Facilities (CARF)), 4891 East Grant Road #81--North Wilmot--Road, Tucson, Arizona 85711, 1996 1999;

1997 Hospital Accreditation Standards (Joint Commission on Accreditation of Healthcare Organizations (JCAHO)), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996);

1997 Standards for Behavioral Health Care ~~Consolidated Standards Manual~~ (Joint Commission on Accreditation of Healthcare Organizations (JCAHO)), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996 July-17-1999;

Education Standards ~~Programs--for--Multi-Handicapped--Students~~ (National Accreditation Council for Agencies Serving the Blind and Visually Handicapped, 15 West 65th Street, New York, New York 10023, 1994 1999); or

Standards for Agency Management and Service Delivery ~~Provisions for Accreditation~~ (Council on Accreditation of Services for Families and Children, Inc. (COA), 120 Wall Street, 11th Floor 520--6th--Avenue--Suite--2202B, New York, New York 10005 19918, 1996 1997).

"Act." The Mental Health and Developmental Disabilities Confidentiality Act [740 ILCS 110]. ~~1111-Rev--Stat--1989--ch--91--1/27 par--801--et--seq--7~~

"Adaptive behavior." The effectiveness or degree with which the individual approaches the standards of personal independence and social responsibility expected of the individual's age and cultural group as measured by adaptive behavior scales such as the Inventory for Client and Agency Planning (ICAP) (DLM Teaching Resources, One DLM Park, Allen, Texas 75002, 1986) and Scales of Independent Behavior (SIB) (DLM Teaching Resources, One DLM Park, Allen, Texas 75002, 1985).

"Authorized agency representative." A person appointed by the governing body who has responsibility for the program's administration including its content and fiscal affairs.

"Aversive procedures." The application of unpleasant or painful stimuli or stimuli that have a potentially noxious effect, contingent on the exhibition of a specific behavior that is not adaptive.

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"Behavior management." Efforts to increase adaptive behaviors and to modify problem behaviors or behaviors that are not adaptive and replace them with behaviors and skills that are adaptive and socially productive.

~~"Bureau--the--Department--s--Bureau-of-Certification-and-Bicensure--~~

"Code." The Mental Health and Developmental Disabilities Code [405 ILCS 5]. ~~1111-Rev--Stat--1989--ch--91--1/27--par--1-100--et--seq--7~~

"Day." A calendar day, unless otherwise indicated.

"Deemed status." If a provider has been accredited by an approved accrediting body as identified in the definition of "accreditation" in this Section, the Department shall deem the provider to be in substantial compliance with specific Sections of this Part. Deemed status, however, may be nullified by a finding by the Department that the provider is in substantial non-compliance with one or more of the designated Sections.

"Department." The Department of Mental Health and Developmental Disabilities or successor agency.

"Developmental disability." A disability which is attributable to mental retardation, cerebral palsy, epilepsy or autism; or to any other condition which results in an impairment similar to that caused by mental retardation and which requires services similar to those required by ~~mentally-retarded--individuals~~ individuals with mental retardation. Such disability must originate before the age of 18, be expected to continue indefinitely, and constitute a substantial handicap. (Section 1-106 of the Code);

"Director." The Director of the Department.

"Discharge." The full release of an individual from a program.

"Equivalency." Evidence to substantiate compliance with requirements of this Part by means other than indicated in this Part.

"Exclusion." Preventing an individual's entrance or continuation in a program due to the individual's disability, medical condition, or maladaptive behavior, or due to lack of space in the day program.

"Exploitation." Any act that uses individuals, their resources or their possessions for the provider's employee's personal gain or for the provider's benefit.

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"Family." The individual's spouse, children, mother, father, sister and brother.

"Full compliance." A survey finding that a program has no identified deficiencies with the standards in this Part.

"Governing body." The provider's decision-making authority which establishes policies for the program's operation and the welfare of the individuals served.

"Guardian." The plenary or limited guardian or conservator appointed by the court for an individual over age 18 so long as the limited guardian's duties encompass concerns related to service requirements.

"Imminent risk." A situation in which individuals in a program are or may be subject to mental, physical or psychological harm which is not immediately correctable, such as environmental or safety hazards.

"Individual." A person who is applying for or receiving services in a program.

"Individual record" or "record." Materials kept chronologically by a program in the course of providing services to an individual.

"Individual services plan" or "plan." A written plan which includes an assessment of the individual's strengths and needs, a description of the services needed regardless of availability, objectives for each service, the role of the individual, guardian, significant others, and the family in the implementation, if the individual agrees to their participation. The plan shall also include a timetable for the accomplishment of objectives, and the names of the persons responsible for their implementation.

"Industrial norm." A standard of measured productivity outcomes of a specific work activity as determined by a time and motion study conducted on workers who are not impaired for the work being performed by age, physical or mental disability, or injury.

"Informed consent." Permission freely granted by the individual or guardian based on full disclosure to the individual or guardian of the benefits and/or liabilities of participation in specific procedures and/or services, including the releases of information, as part of the individual's services plan.

"Interdisciplinary team" or "team." A group consisting of at least the individual, parents (except when a non-legally disabled individual or a legally disabled individual's guardian does not desire them to

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participate), the guardian, as well as representatives of disciplines and services necessary to identify the individual's needs and to design services and alternatives to meet them. At least one member of the team shall be a qualified mental retardation professional.

"Maladaptive behavior." Actions by the individual that interrupt services, require a specific program addressing the behavior developed by the interdisciplinary team and exclude instances requiring only a verbal prompt such as "please sit down."

"Mental retardation." "Mental-retardation:" Significantly Significant subaverage general intellectual functioning which exists concurrently with impairment in adaptive behavior and which originates before the age of 18 years. (Section 1-116 of the Code)

"Moral turpitude." Moral quality of being inherently base, depraved, vile or wicked.

"Neglect." Failure to provide adequate medical or personal care or maintenance to an individual which results in physical or mental injury or in the deterioration of an individual's physical or mental condition. (Section 1-117.1 of the Code).

"Notice of violation." A report submitted by OAL ~~the Bureau~~ to a provider listing the program's deficiencies with this Part as noted during a survey.

"OAL." The Department's Office of Accreditation and Licensure.

"Plan of correction." A written plan submitted by a provider to OAL the--Bureau in response to a notice of violation, which describes the steps the provider will take to bring the program into compliance, including the time-frames for completion of each step.

"Program." Services provided in non-residential facilities to adults who are developmentally disabled and require training in self-help, community living skills, social and leisure skills, communication or productive work.

"Progress notes." Narrative chronological documentation in an individual's record of service provided and its relationship to the plan.

"Provider." A sole proprietorship, association, partnership, corporation or organization, public or private, either for profit or not-for-profit, which operates a developmental training program under the jurisdiction of a governing body or board.

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"Qualified mental retardation professional (QMRP)." A QMRP must have at least one year of experience working directly with individuals with mental retardation or other developmental disabilities and be one of the following:

A doctor of medicine or osteopathy licensed pursuant to the Medical Practice Act of 1987 [225 ILCS 60] (iii-Rev-Stat-1987-1989 ch-111, par-4400-i-et-seq-7);

A registered nurse licensed pursuant to the The Illinois Nursing Act of 1987 [225 ILCS 65] (iii-Rev-Stat-1989-1989 ch-111, par-350i-et-seq-7);

An occupational therapist or occupational therapist assistant certified by the American Occupational Therapy Association or other comparable body (Illinois Occupational Therapy Practice Act [225 ILCS 75] (iii-Rev-Stat-1989-1989 ch-111, par-370i-et-seq-7));

A physical therapist certified by the American Physical Therapy Association or other comparable body (Illinois Physical Therapy Act [225 ILCS 90] (iii-Rev-Stat-1989-1989 ch-111, par-425i-et-seq-7));

A physical therapist assistant registered by the American Physical Therapy Association or a graduate of a two-year college-level program approved by the American Physical Therapy Association or comparable body;

A psychologist with at least a master's degree in psychology from an accredited school (Clinical Psychologist Licensing Act [225 ILCS 15] (iii-Rev-Stat-1989-1989 ch-111, par-535i-et-seq-7));

A social worker with a bachelor's degree from a college or university or graduate degree from a school of social work accredited or approved by the Council on Social Work Education or another comparable body (the Clinical Social Work and Social Work Practice Act [225 ILCS 20] (iii-Rev-Stat-1989-1989 ch-111, par-635i-et-seq-7));

A speech-language pathologist or audiologist with a certificate of Clinical Competence in Speech-Language Pathology or Audiology granted by the American Speech Language Hearing Association or comparable body or meet the education requirements for licensure and be in the process of accumulating the supervised experience required for licensure (the Illinois Speech-Language Pathology and Audiology Practice Act [225 ILCS 110] (iii-Rev-

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Stat-1989-1989 ch-111, par-790i-et-seq-7);

A professional recreation staff person with a bachelor's degree in recreation or in a specialty area such as art, dance, music or physical therapy;

A professional dietitian registered by the American Dietetics Association; or

A human services professional with a bachelor's degree in a human services field, including, but not limited to sociology, special education, rehabilitation counseling or psychology.

"Quality assurance." A systematic and objective approach to monitoring and evaluating the appropriateness, adequacy and quality of services in order to identify and resolve problems.

"Restraint." The direct restriction through mechanical means or personal physical force of the limbs, head or body of an individual except as part of a medically prescribed procedure for the treatment of an existing physical disorder or the amelioration of a physical handicap. The partial or total immobilization of an individual for the purpose of performing a medical or surgical procedure shall not constitute restraint. (Section 1-125 of the Code)

"Seclusion." Sequestration by placement of an individual alone in a room from which he or she has no means of leaving. (Section 1-126 of the Code)

"Self-administration of medications." An individual's ability to take medications independently or with verbal prompts.

"Skills training." Activities which focus on the development of daily living skills which enable individuals to achieve independent functioning and economic self-sufficiency.

"Substantial compliance." A determination that a surveyed program does not have a deficiency or group of deficiencies sufficient to jeopardize the health, welfare or safety of individuals or prevent their maximum development; or, when deficient, the provider has documented a plan of correction to rectify any deficiency or has an approved equivalency or waiver for it.

"Survey." A process to determine the degree of compliance with this Part which a program has maintained, including surveyor observation and an on-site examination of policies, procedures, records of individuals, written plans, and the physical plant. Interviews of

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individuals and staff are also a part of the survey.

"Suspension." The conditional release of an individual from a program.

"Time-out." When an individual is placed in a behavior modification program pursuant to his or her individual services plan, he or she may be removed from a situation that affords positive reinforcement to an area where reinforcement is not available for a reasonable period of time as determined by the team but not to exceed 30 minutes.

"Waiver." Department-granted exceptions to this Part on application by a provider, for a period not to exceed the duration of the current certificate.

"Work activity." The individual performs work such as contract janitorial, simulated assembly, and food service.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

SUBPART B: PROGRAM REQUIREMENTS

Section 119.210 Exclusion, suspension or discharge of an individual

- a) Exclusion, suspension or discharge may occur due to:
- 1) The individual's desire to stop participation;
 - 2) The individual's attainment of the exit criteria;
 - 3) The individual's physical disability or medical condition which places the individual in danger; or
 - 4) Maladaptive behavior that places the individual or others in serious danger.
- b) Lack of space in a program shall not be used to suspend or discharge individuals and shall be used only to deny admission to a program that is presently filled.
- c) The provider shall refer all proposals excluding, suspending or discharging an individual to the team which shall determine whether the criteria in subsection (a) of this Section have been met, recommend alternative services and determine the criteria under which the individual may enter or re-enter the program.
- d) Before exclusion, suspension or discharge, the team shall discuss, summarize and place in the individual's record the date and reason for this action.
- e) A provider shall not suspend or discharge an individual from a program without at least a 10-day 24-hour written notice to the individual or guardian except when it is documented that the individual is dangerous to himself or herself or others and the behavior cannot be corrected

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through special training procedures.

- f) An individual shall have the opportunity to appeal to the agency representative the provider's decision to exclude, suspend or discharge him or her in accordance with the procedures required in Section 119.235(e) of this Part.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

Section 119.270 Accreditation

- a) Providers demonstrating current accreditation status under any of the standards of the accrediting organizations identified in the definition of "accreditation" in Section 119.120 of this Part shall be granted deemed status for the following Sections of this Part:

- 1) Section 119.200(a) and (b);
 - 2) Section 119.205;
 - 3) Section 119.210(a) through (d);
 - 4) Section 119.215;
 - 5) Section 119.220;
 - 6) Section 119.225;
 - 7) Section 119.230(a) and (c) through (f);
 - 8) Section 119.240(a) and (c) through (h);
 - 9) Section 119.245;
 - 10) Section 119.250; and
 - 11) Section 119.260(a) through (e), (g), (i) and (j).
- b) Demonstration of current accreditation status shall be achieved by submission of a certificate of accreditation and the most recent accreditation report by the provider to the Department.
- c) If the provider's accreditation status changes for any reason, the provider shall notify the Department of that change within 30 days after the effective date of the change.

(Source: Added at 21 Ill. Reg. _____, effective _____)

Section 119.305 Application for certification

- a) Forms

Providers shall obtain application forms by writing to:--Bureau--of Certification--and--Licensure--Department--of--Mental--Health--and Developmental Disabilities--4201 North Oak Park Avenue--Chicago--IL 60634--

Office of Accreditation and Licensure
Department of Mental Health and
Developmental Disabilities

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405 Stratton Building
Springfield, IL 62765

- b) Certification renewal
- 1) Each certified provider shall submit a renewal application at least 120 days before expiration of the certification. The Department shall mail an application to the provider prior to the 120 day period before expiration.
 - 2) ~~At the request of a provider, the Department shall waive certification renewal requirements in this Part for accredited programs at the point of certification renewal.~~
 - 3) ~~A provider accredited under subsection (2) above shall submit the current accreditation report by the accrediting body along with the application for certification renewal, if a provider fails or refuses to submit its most recent accreditation report along with its applications, the Department shall not waive any certification requirement.~~
 - 2) ~~4) Prior to recertification, OAL the Bureau shall survey a provider that is not accredited under subsection (2) above and an accredited provider which did not request a waiver of the survey requirement.~~
 - 3) ~~5) The Department shall recertify a provider in compliance with this Part for an additional one-year period.~~
 - 4) ~~6) When the Department does not approve a provider for recertification, the Department shall notify the provider, in writing, within 30 days after of the decision.~~
 - 5) ~~7) The notice shall include a clear and concise statement of the violation on which the determination is based and notice of the opportunity for a hearing in accordance with Section 119.330 of this Part.~~
 - 6) ~~8) The Department shall consider approving written requests for the development and certification of new providers when the following conditions are presented to the Department and verified:~~
 - A) The provider shall not force:
 - i) The provision of a service or residential setting on an individual or guardian which does not meet the individual's needs and desires; or
 - ii) Residential relocation of individuals away from participating relatives;
 - B) The provider demonstrates through letters of support or working agreement, a willingness to work cooperatively in coordinating services with residential service providers in the geographic area where services are provided; and
 - C) The provider shall identify unserved individuals who have been assessed to be in need of developmental training.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED AMENDMENT(S)

- 1) Heading of the Part: Minimum Standards for Licensure of Community Residential Alternatives
- 2) Code Citation: 59 Ill. Adm. Code 113
- 3) Section Number: Proposed Action:
113.10 Amended
113.55 Amended
- 4) Statutory Authority: Implementing and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104], Section 5 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/5] and Section 5 of the Community Residential Alternatives Licensing Act [210 ILCS 140/5].
- 5) A Complete Description of the Subjects and Issues Involved: Part 113 is being amended to apply deemed status to community providers accredited by the Joint Commission on the Accreditation of Healthcare Organizations, the Council on Accreditation of Services for Families and Children, the Accreditation Council, the Commission on Accreditation of Rehabilitation Facilities and the National Accreditation Council for Agencies Serving the Blind and Visually Handicapped. A definition of "deemed status" has been added to Section 113.10. Section 113.55 has been amended to clarify which Sections of Part 113 are eligible for deemed status and the method by which community agencies can demonstrate current accreditation status. Various technical changes are also being made to this Part.
- 6) Will this proposed amendment replace an emergency rule currently in effect? No
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this proposed amendment contain incorporation by reference? This rulemaking incorporates by reference the standards of five accrediting organizations.
- 9) Are there any other proposed amendments pending on this Part? Yes

Section Numbers	Proposed Action	IL Register Citation
113.30	Amended	20 Ill. Reg. 13497
113.51	New Section	20 Ill. Reg. 16025
- 10) Statement of Statewide Policy Objectives: This rulemaking does not impact the State Mandates Act [30 ILCS 805].
- 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Any interested person may submit comments, data, views or argument regarding this proposed rulemaking before the expiration

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of the first 45-day notice period. Submissions must be in writing and directed to:

Judith Hollenberg
Rules Administrator
Department of Mental Health
and Developmental Disabilities
401 Stratton Building
Springfield IL 62765
217/785-3313
FAX 217/524-8920

12) Initial Regulatory Flexibility Analysis:

- A) Types of small business affected: Private agencies which agencies which operate community residential alternatives licensed by the Department.
- B) Reporting, bookkeeping or other procedures required for compliance: None required.
- C) Types of professional skills necessary for compliance: No special skills needed.

13) Regulatory Agenda on which this rulemaking was summarized: July 1996

The full text of the Proposed Amendment(s) begins on the next page.

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TITLE 59: MENTAL HEALTH
CHAPTER I: DEPARTMENT OF MENTAL HEALTH
AND DEVELOPMENTAL DISABILITIES

PART 113

MINIMUM STANDARDS FOR LICENSURE OF
COMMUNITY RESIDENTIAL ALTERNATIVES

Section

- 113.10 Definitions
- 113.15 Incorporation by reference
- 113.20 Application for license
- 113.30 Complaint procedures
- 113.40 Departmental inspections
- 113.45 Monitoring and evaluation
- 113.50 Administrative policies and practices
- 113.55 Accreditation
- 113.60 Personnel and staffing policies
- 113.70 Site, physical plant standards
- 113.80 Physical plant services
- 113.90 Food and nutrition services
- 113.100 Admission/discharge
- 113.110 Resident rights
- 113.120 Resident records
- 113.130 Resident living program
- 113.140 Unusual occurrences

AUTHORITY: Implementing and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104], Section 5 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/5] and the Community Residential Alternatives Licensing Act [210 ILCS 140].

SOURCE: Emergency rule adopted and codified at 6 Ill. Reg. 7239, effective June 8, 1982, for a maximum of 150 days; emergency expired November 5, 1982; adopted at 7 Ill. Reg. 1054, effective January 19, 1983; amended at 17 Ill. Reg. 21387, effective November 29, 1993; amended at 21 Ill. Reg. _____, effective _____.

Section 113.10 Definitions

As used in the Community Residential Alternatives Licensing Act and this Part, unless the context otherwise requires, the terms defined in this Section have the meanings ascribed to them herein.

"Abuse." Any physical injury, sexual abuse or mental injury inflicted on an individual other than by accidental means. (Section 1-101.1 of the Mental Health and Developmental Disabilities Code (Ill. Rev. Stat. 1991, ch. 91-172, par. 1-101.1)-(405-105-5/1-101.1))

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Physical injury includes all injuries serious enough to require immediate medical treatment by a physician, such as fractures and lacerations which require suturing and all other injuries which because of the circumstances or nature of the injury indicate possible abuse or neglect;

Sexual abuse includes but is not limited to any sexual penetration or sexual conduct between an individual and another person if the individual has been adjudicated legally disabled, or has a guardian, or is unable to understand the nature of the act or is unable to give knowing consent, or is injured, or alleges that there is, or there is evidence of use of force, coercion, or the exchange of money or anything of value; and

Mental injury includes use of words, signs, gestures or other actions by anyone against an individual which intimidates, demeans, harasses, causes emotional anguish or distress, ridicules, threatens, harms or will knowingly incite or precipitate maladaptive behavior on the part of an individual. Mental injury also includes exploitation, which is any act that uses individuals, their resources or their possessions for an agency employee's personal gain or for the agency's benefit.

"Access." The right to:

enter any CRA;

seek consent to communicate privately and without restriction with any resident;

communicate privately and without restriction with any resident who consents to the communication;

inspect the clinical and other records of a resident with the express written consent of the resident, and/or guardian, if appropriate;

observe all areas of the CRA except the living area of any resident who protests the observation.

"Accreditation." A process establishing that a program complies with nationally recognized standards of care as set by one of the following:

1997 Hospital Accreditation Standards
Hospitals Accredited (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996 1999);

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Standards for Agency Management and Service Delivery Manual--for Agency Accreditation (Council on Accreditation of Services for Families and Children (COA), 120 Wall Street, 11th Floor 529 Eighth Avenue--Suite-2202B, New York, New York 10005 10010, 1996 1992);

1997 Mental--Health Standards for Behavioral Health Care or Standards Manual and Interpretive Guidelines for Employment and Community Support Services (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996 1993);

Outcome Based Performance Measures Standards--for--Services--for People--with--Disabilities (Accreditation Council on Services--for People--with--Disabilities (Council), 100 West Road, Suite 406, Towson, Maryland 21204, 1993 8100--Professional--Place--Suite-204, Landover--Maryland-20785-1990);

Standards Manual and Interpretive Guidelines for Behavioral Health for--Organizations--Serving--People--with--Disabilities (Commission on Accreditation of Rehabilitation Facilities (CARF), 4891 East Grant Road, 10001--North--Wilmot--Road, Tucson, Arizona 85711, 1996 1992); or

Education Standards (National Accreditation Council for Agencies Serving the Blind and Visually Handicapped, 15 West 65th Street, New York, New York 10023, 1994).

"Act." As used in this Part these--standards, the Community Residential Alternatives Licensing Act.

"Activity program." A specific planned program of varied group and individual activities geared to the individual resident's needs and available for a reasonable number of hours each day. Subgroups: e.g., leisure, recreation, religion, community, volunteers.

"Adaptive behavior." Standards of personal independence and social responsibility expected of the resident's age-appropriate and cultural group.

"Addition." Any construction attached to the original building which increases the area of cubic content of the building.

"Adult." A person 18 years of age or older. (Section 3 of the Act)

"Advocate." A person who represents the rights and interests of an individual as though they were the person's own, in order to realize

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the rights to which the individual is entitled, obtain needed services, and remove barriers to meeting the individual's needs.

"Agency." An organizational entity which coordinates the establishment and ongoing function of a community residential alternative.

"Alteration." Any construction change or modification of an existing building which does not increase the area or cubic content of the building.

"Ambulatory resident." A person who is physically and mentally capable of walking without assistance.

"Applicant." Any person, agency, association, corporation, partnership, or organization making application for a license. (Section 3 of the Act)

"Appropriate." A term used to indicate that a requirement is to be applied according to the needs of a particular individual or situation, and that that requirement is in substantial compliance.

"Appropriate programming." Programming which meets each resident's individual needs commensurate with his or her ~~his/her~~ functioning level. (Section 3 of the Act)

"Assessment." The use of an objective system with which to evaluate the physical, social, developmental, behavioral, psychosocial, etc., aspects of a resident.

"Assistance." To give help to or aid.

"Audiologist." A person who is certified or is eligible for a Certification of Clinical Competence in audiology granted by the American Speech-Language-Hearing Association under its requirements in effect on the publication of this provision, or meets the educational requirements for certification, and is in the process of accumulating the supervised experience required for certification.

"Autism." Autism is a developmental disability which is manifested by a combination of significant disturbances in intellectual, sensory, cognitive, social, physiological, and emotional functioning and is distinguished from other related disorders by: impaired or disordered language and communication; failure to develop appropriate social relationships; ritualistic or compulsive behaviors.

"Aversive stimuli." The use of means that are unpleasant, annoying, painful, potentially damaging to body tissue or that otherwise

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threaten the well being of the resident such as loud noises, electric shock, and chemical irritants--etc.

"Behavior modification." Techniques to be used to change or revise current behavior patterns.

"Basement." When used in these standards, means any story or floor level below the main or street floor. When ~~where~~ due to grade difference, there are two levels each qualifying as a street floor, a basement is any floor below the level of the two street floors. Basements shall not be counted in determining the height of a building in stories.

"Basic care." Provides a resident with support, care and assistance necessary for that person to maintain, preserve and enhance the individual's health condition, safety and self-preservation. Basic care services are intended to assist the resident to maintain and/or improve his ~~or~~ her physical and developmental condition.

"C" rating." A technical classification system used to determine flame spread ranges of interior finishes by the National Fire Protection Association (NFPA) 101, Life Safety Code. A "C" rating is considered normal residential construction.

"Cerebral palsy." A disorder dating from birth or early infancy, non-progressive, characterized by examples of aberrations of motor function (paralysis, weakness, incoordination) and often other manifestations of organic brain damage such as sensory disorder, seizures, mental retardation, learning difficulty and behavior disorders.

"Code." The Mental Health and Developmental Disabilities Code [405 ILCS 5].

"Community residential alternative." A group home for eight ~~8~~ or fewer individuals with developmental disabilities (adults) who are unable to live independently but are capable of community living if provided with an appropriate level of supervision, assistance and support services. A community residential alternative may provide training and guidance to residents in the skills of daily living and shall provide opportunities for participation in community activities. A community residential alternative shall not be a medical or nursing facility. (Section 3 of the Act)

"Complainant." Any person, community residential alternative resident, staff member, relative or governmental body that files a complaint with the Department against a community residential alternative.

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"Concentration." The grouping or clustering of CRA's and/or other residential alternatives in a defined area which inhibits the meeting of resident's social and physical needs through the locally available community-neighborhood resources. (Certain restrictions may be imposed by the Department on CRA locations in order to maintain a normalized distribution of CRA's in a defined area.)

"Conversion." Converting a building for use as a CRA.

"Corridor." An interior passage which is part of an exit in that it provides access to an exit.

"Corporal punishment." Painful stimuli inflicted directly upon the body.

"CRA." Acronym for community residential alternative.

"Deemed status." If an agency has been accredited by an approved accrediting body as identified in the definition of "accreditation" in this Section, the Department shall deem the agency to be in substantial compliance with specific Sections of this Part. Deemed status, however, may be nullified by a finding by the Department that the agency is in substantial non-compliance with one or more of the designated Sections.

"Dentist." Any person licensed by the State of Illinois to practice dentistry, including persons holding a Temporary Certificate of Registration, as provided in the Illinois Dental Practice Act (Rev.-Stat.-1991-Ch--117-Pars--2301-et-seq-) [225 ILCS 25].

"Department." The Department of Mental Health and Developmental Disabilities or successor agency. (Section 3 of the Act)

"Developmental disability." Disability which is attributable to mental retardation, cerebral palsy, epilepsy or autism; or to any other condition which results in impairment similar to that caused by mental retardation and which requires services similar to those required by individuals with mental retardation mentally-retarded persons. Such disability must originate before the age of 18 years, be expected to continue indefinitely, and constitute a substantial handicap. (Rev.-Stat.-1991-Ch--91-1/27-Pars--1-106) [405 ILCS 5/1-106]

"Dietitian." A person who is eligible for registration by the American Dietetic Association; or has a baccalaureate degree with major studies in food and nutrition, dietetics, or food service management; has one year of supervisory experience in the dietetic service of a health care institution, and participates annually in

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continuing dietetic education.

"Director." The Director of the Department of Mental Health and Developmental Disabilities. (Section 3 of the Act)

"Discharge." The full release of any resident from a CRA.

"Distinct part." An entire physically identifiable unit to be established within another structure. The Department does not permit licensure of a CRA within another entity licensed by either the Department of Children and Family Services or Public Health.

"Emergency." A situation, physical condition or one or more practices, methods or operations which present imminent danger of death or serious physical or mental harm to resident(s) of a CRA.

"Epilepsy." A condition when recurrent electrical discharges in the brain disturb the normal function of the nervous system. These episodes of disturbances are called seizures. Seizures can involve a temporary loss of consciousness or temporary changes in behavior. The exact changes of behavior depend on the area of the brain which is being stimulated by the electrical discharge.

"Evaluation report." A written report filed by a qualified surveyor from the Department based on the requirement of the Community Residential Alternatives Licensing Act and the standards promulgated thereunder.

"Financial responsibility." Sufficient assets to provide adequate services such as staff, heat, laundry, foods, supplies, and utilities for at least a two-month period of time.

"Goal." An expected result or condition that involves a specified period of time to achieve, that is specified in behavioral terms in a statement of relatively broad scope, and that provides guidance in establishing specific objectives directed toward its attainment.

"Governing body." The policy-making authority, whether an individual or a group, that exercises general direction over the affairs of a CRA and establishes policies concerning its operation and the welfare of the residents it serves.

"Guardian." A person appointed as a guardian of the person and/or estate under the Probate Act of 1975 (Rev.-Stat.-1991-Ch--119-1/27-Pars--1-1-et-seq-) [755 ILCS 5].

"Habilitation." An effort directed toward the alleviation remediation

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of a developmental disability or toward increasing an individual's level of physical, mental, social or economic functioning, independence and self-respect. Habilitation may include, but is not limited to, diagnosis, evaluation, medical services, residential care, day care, special living arrangements, training, education, sheltered employment, protective services, counseling and other services through interaction and participation in the community. (Section 1-111 of the Code) ~~§11-1-111-Rev.---1991---ch.---91---1/27---par.---1-111-(405-1B5 5/1-111)~~

"Hall" or "hallway." An interior passage which provides access to a room or area from another room or area and is not part of an exit.

"Health care services." Assist the resident to maintain and/or improve his or her health and physical capabilities, such as helping the resident maintain a medication schedule, use a prosthetic or orthopedic device, plan a special diet, or reinforce an occupational or physical therapy service rendered to the resident.

"Hospitalization." The care and treatment of a resident in a hospital as an inpatient.

"Illinois Client Information System (ICIS)." A comprehensive assessment tool, used by the Department of Mental Health and Developmental Disabilities, which assembles behavioral and socio-demographic information and developmental progress, necessary for decision-making about residents' programs.

"Individual educational program (IEP)." A written statement for each resident that provides for specific education and related services. The IEP may be incorporated into the IHP. It must be an identifiable component, separate or as part of IHP.

"Individual habilitation plan (IHP)." A written plan as defined in Section 4-309 of the ~~Mental Health and Developmental Disabilities Code~~ ~~§11-1-Rev.---1991---ch.---91---1/27---par.---4-309-(405 ILCS 5/4-309)~~. (Section 3 of the Code)

"Interdisciplinary team." Each resident's interdisciplinary team is constituted of persons drawn from, or representing, the professions, disciplines, or service areas that are relevant to identifying the resident's needs and designing programs to meet them. At least one member of the team shall be a qualified mental retardation professional.

"License." Any of the following types of licenses issued to an applicant or licensee by the Department:

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"Probationary license." A license issued to an applicant or licensee which has not held a license contiguous to its application.

"Regular license." A license issued to an applicant or licensee which is in substantial compliance with the Community Residential Alternatives Licensing Act and ~~any standards promulgated hereunder this Part.~~ (Section 3 of the Act)

"Licensee." A person, agency, association, corporation, partnership or organization which has been issued a license to operate a community residential alternative. (Section 3 of the Act)

"Licensed practical nurse." A person with a valid current Illinois license to practice as a practical nurse. (Illinois Nursing Act of 1987 [225 ILCS 65])

"Maladaptive behavior." Impairment in adaptive behavior as determined by clinical evaluation or psychological testing. Impaired adaptive behavior may be reflected in delayed maturation or reduced learning ability or inadequate social adjustment.

"Mentally retarded and mental retardation." ~~Significantly subaverage general intellectual functioning which exists concurrently with impairment in adaptive behavior and which originates before the age of 18 years. mental retardation.---Significantly subaverage general intellectual functioning which exists concurrently with impairment in adaptive behavior and which originates before the age of 18 years.~~ (Section 1-116 of the Code)

"Misappropriation of property." Using a resident's cash, clothing, or other possessions without authorization by the resident or the resident's authorized representative; failure to return valuables after a resident's discharge; or failure to refund money after death or discharge when there is an unused balance in the resident's personal account.

"Mobile resident." Any resident who is not bedfast, but is able to move about either independently or with the aid of assistive devices such as walkers, crutches, wheelchairs, wheeled platforms, and so forth.

"Natural family." Parents (natural or adoptive), siblings, grandparents, aunts and/or uncles.

"Neglect." ~~A failure~~ ~~failure~~ in a community residential alternative to provide adequate medical or personal care or maintenance which failure results in physical or mental injury to a to

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provide--adequate--medical--or--personal--care--or--maintenance--which failure--results--in--physical--or--mental--injury--to--a resident or in the deterioration of a resident's physical or mental condition or in the deterioration of a resident's physical or mental condition. (Section 1-117.1 of the Code)

"New construction." A new building or addition to, or conversion of a building.

"Normalization." The principle of helping residents to obtain an existence as close to normal as possible, by making available to them patterns and conditions of everyday life that are as close as possible to the norms and patterns of the mainstream of society.

"Nurse." A registered nurse or a licensed practical nurse as defined in the Illinois Nursing Act of 1987 (1987 Rev. Stat. Ch. 111, par. 3501-et-seq.) [225 ILCS 65].

"Objective." An expected result or condition that involves a specified period of time to achieve, that is specified in behavioral terms, and that is related to the achievement goal.

"Occupational therapist, registered (OTR)." A person who is a graduate of an occupational therapy curriculum accredited jointly by the Council on Medical Education of the American Medical Association and the American Occupational Therapy Association; or is eligible for certification by the American Occupational Therapy Association.

"Occupational therapy assistant." A person who is eligible for certification as a Certified Occupational Therapy Assistant (COTA) by the American Occupational Therapy Association.

"Owner." The individual, partnership, corporation, association or other person who owns a community residential alternative. In the event a community residential alternative is operated by a person who leases the physical plant, which is owned by another person, "owner" means the person who operates the community residential alternative, except that if the person who owns the physical plant is an affiliate of the person who operates the community residential alternative and has significant control over the day-to-day operations of the community residential alternative, the person who owns the physical plant shall incur jointly and severally with the owner all liabilities imposed on an owner under the this Act. (Section 3 of the Act)

"Pharmacist, registered." Any person who holds a certificate of registration as a registered pharmacist, a local registered pharmacist or a registered assistant pharmacist under the Pharmacy Practice Act of 1987 (1987 Rev. Stat. Ch. 111, par. 4121-et-seq.) [225 ILCS

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85].

"Physical therapist." A person licensed with the Department of Professional Regulation as a physical therapist under the Illinois Physical Therapy Act (1991 Rev. Stat. Ch. 111, par. 4251-et-seq.) [225 ILCS 90], and has graduated from a physical therapy curriculum approved by the American Physical Therapy Association, or by the Council on Medical Education and Hospitals of the American Medical Association, or jointly by the Council on Medical Education of the American Medical Association and the American Physical Therapy Association.

"Physical therapy assistant." A person who has graduated from a two-year college level program approved by the American Physical Therapy Association.

"Physician." Any person licensed by the State of Illinois to practice medicine in all its branches and includes any person holding a Temporary Certificate of Registration, as provided in the Medical Practice Act of 1987 (1987 Rev. Stat. Ch. 111, par. 4400-et-seq.) [225 ILCS 60].

"Plan of Correction." A written plan submitted to the Department for violation(s) of the Community-Residential-Alternatives Licensing Act or this Part of rules promulgated hereunder which are cited by the Department. The plan shall describe the steps that will be taken in order to bring the community residential alternative into compliance and the time-frame for completion of each step. (Section 3 of the Act)

"Psychiatrist." A person, as defined under "Physician" in this Section these standards, who is board eligible or board certified in psychiatry.

"Psychologist." A person licensed under the Clinical Psychologist Licensing Act (1991 Rev. Stat. Ch. 111, par. 5351-et-seq.) [225 ILCS 15].

"Qualified mental retardation professional (QMRP)." A QMRP must: Have at least one year of experience working directly with individuals with mental retardation or other developmental disabilities and be one of the following:

A doctor of medicine or osteopathy licensed pursuant to the Medical Practice Act of 1987 (1987 Rev. Stat. Ch. 111, par. 4400-et-seq.) [225 ILCS 6017];

A registered nurse licensed pursuant to the Illinois Nursing Act

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of 1987 ~~††††-Rev--Stat--1991†-ch--††††-par--350†-et-seq-†~~ [225 ILCS 65];

An occupational therapist or occupational therapist assistant certified by the American Occupational Therapy Association or other comparable body (Illinois Occupational Therapy Practice Act ~~††††-Rev--Stat--1991†-ch--††††-par--370†-et-seq-†~~ [225 ILCS 75]);

A physical therapist certified by the American Physical Therapy Association or other comparable body (Illinois Physical Therapy Act ~~††††-Rev--Stat--1991†-ch--††††-par--425†-et-seq-†~~ [225 ILCS 90]);

A physical therapist assistant registered by the American Physical Therapy Association or a graduate of a two-year college-level program approved by the American Physical Therapy Association or comparable body;

A psychologist with at least a master's degree in psychology from an accredited school (Clinical Psychologist Licensing Act ~~††††-Rev--Stat--1991†-ch--††††-par--535†-et-seq-†~~ [225 ILCS 15]);

A social worker with a bachelor's degree from a college or university or graduate degree from a school of social work accredited or approved by the Council on Social Work Education or another comparable body (the Clinical Social Work and Social Work Practice Act ~~††††-Rev--Stat--1991†-ch--††††-par--635†-et-seq-†~~ [225 ILCS 10]);

A speech-language pathologist or audiologist with a certificate of Clinical Competence in Speech-Language Pathology or Audiology granted by the American Speech Language Hearing Association or comparable body or meeting the education requirements for licensure and being in the process of accumulating the supervised experience required for licensure (the Illinois Speech-Language Pathology and Audiology Practice Act ~~††††-Rev--Stat--1991†-ch--††††-par--790†-et-seq-†~~ [225 ILCS 110]);

A professional recreation staff person with a bachelor's degree in recreation or in a specialty area such as art, dance, music or physical therapy;

A professional dietitian registered by the American Dietetics Association; or

A human services professional with a bachelor's degree in a human services field, including but not limited to sociology, special

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education, rehabilitation counseling and psychology.

"Qualified surveyor." *Any individual or any governmental agency designated by the Department to survey community residential alternatives for compliance with the Community--Residential Alternatives-Licensing Act and this Part these-standards.* (Section 3 of the Act) Any individual designated as an agent of the Department's Quality Assurance Unit and who has successfully completed the Department's quality assurance training program for surveyors and possesses a baccalaureate degree with at least one year of paid working experience with the developmentally disabled. All qualified surveyors employed by the Department after December 1, 1993, shall meet this requirement.

"Reasonable visiting." Any time which does not interfere with normal sleeping hours or scheduled programming.

"Registered nurse." A person with a valid current Illinois registration to practice as a registered professional nurse.

"Renovate." Remodel by restoring, reconditioning or rehabilitating a structure for use as a CRA.

"Reputable moral character." Having no history of a conviction of the applicant, or if the applicant is a firm, partnership, or association, or any of its members, or of a corporation, or any of its officers, or directors, or of the person designated to manage or supervise the community residential alternative, or a felony, or of two or more misdemeanors involving moral turpitude, as shown by a certified copy of the record of the court of conviction, or in the case of the conviction of a misdemeanor by a court not of record, as shown by other evidence; or other satisfactory evidence that the moral character of the applicant, or manager, or supervisor of the community residential alternative is not reputable.

"Resident." *An individual residing in a community residential alternative pursuant to the Community--Residential--Alternatives Licensing Act* (Section 3 of the Act), and receiving services in a CRA.

"Resident living coordinator." A staff member who is at least 21 years of age is ultimately responsible for the day to day operation of the CRA and delivery of programs required to meet the needs of the residents.

"Restraint." *Direct restriction through mechanical means or personal physical force of the limbs, head or body of a recipient or client, except as part of a medically prescribed procedure for the treatment of an existing physical disorder or the amelioration of a physical*

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handicap. The partial or total immobilization of a recipient or client for the purpose of performing a medical/surgical procedure shall not constitute restraint. (Section 1-125 of the ~~Mental--Health--and Developmental--Disabilities~~ Code (~~111--Rev--Stat--1991--ch--91-1/27 par--1-125~~)(~~405--16S-5/1-125~~))

"Safety device." Any equipment or protective devices as prescribed which prevent the residents from falling or otherwise injuring themselves.

"Seclusion." *The sequestration by placement of a recipient or client alone in a room from which he or she has no means of leaving. When a recipient or client is placed in a behavior modification program pursuant to his or her individual services plan, he or she may be restricted to a given area or room for a reasonable period of time and such restriction shall not constitute seclusion.* (Section 1-126 of the ~~Mental-Health-and-Developmental-Disabilities~~ Code (~~111--Rev--Stat--1991--ch--91-1/27--par--1-126~~)(~~405--16S-5/1-126~~))

"Self-care services." Helps the resident perform daily living activities and personal hygiene functions such as toileting, bathing, grooming, and feeding.

"Speech-language pathologist." A person who is certified or is eligible for a Certification of Clinical Competence in speech-language pathology granted by the American Speech-Language-Hearing Association under its requirements in effect on the publication of this Part, or meets the educational requirements for certification, and is in the process of accumulating the supervised experience required for certification.

"Social worker, qualified." A person who:

Is licensed by the State of Illinois (registered or certified by the Illinois Department of Professional Regulation); and

Is a graduate of a school of social work which has been approved by the Council on Social Work Education (some schools are approved for bachelor's degree programs and others for master's degree); and

Has one year of social work experience in a health care setting.

"State Fire Marshal ~~fire-marshal~~." The fire marshal of the Office of the State Fire Marshal, Division of Fire Prevention.

"Stockholder of a corporation." Any person who, directly or indirectly, beneficially owns, holds or has the power to vote, at

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least 5% of any class of securities issued by the corporation.

"Story." That portion of a building between the upper surface of any floor and the upper surface of the floor above except that the topmost story shall be the portion of a building between the upper surface of the topmost floor and the upper surface of the roof above.

"Substantial compliance." An operation composed of a residential component and a program component, which after being surveyed does not have a deficiency, or a group of deficiencies, that taken individually or as a group, jeopardizes those resident's health, welfare and safety. Each deficiency would also be supported by a plan of correction or equivalency that has been approved by the Department.

"Substantially handicapped." A physical or mental disability, resulting from mental retardation, cerebral palsy, epilepsy, or autism, of such severity that alone, or in connection with social, legal or economic constraints, it requires the provision of specialized services over an extended period of time directed toward the resident's social, personal, physical or economic habilitation or rehabilitation.

"Support services." Those services provided to residents in order to facilitate their integration into the community and to improve their level of functioning, independence and self-respect.

"Therapeutic recreation specialist." A person who is eligible for registration as a therapeutic recreation specialist by the National Therapeutic Recreation Society (branch of the National Recreation and Park Association) under its requirements in effect on publication of this provision.

"Title XX eligibility." Under the ~~new~~ block grant legislation service eligibility is based on client characteristics and the need for the service rather than categorical or income eligibility. (45 CFR 96, Subpart G, 1996 1992)

"Transfer." A change in status of a resident's living arrangements from one community residential alternative to another residential alternative.

"Valid license." A license which is unsuspended, unrevoked and unexpired.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

Section 113.55 Accreditation

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NOTICE OF PROPOSED AMENDMENT(S)

- a) Agencies Providers demonstrating current accreditation status under any of the standards of the accrediting organizations identified in the definition of "accreditation" in Section 113.10 of this Part shall be granted deemed status for the following Sections of this Part:
- 1) ~~either the Standards for Services for People with Developmental Disabilities or the Standards Manual for Organizations Serving People with Disabilities (ICAP), Mental Health Standards, Joint Commission on Accreditation of Hospitals (JCAHO), or the Manual for Agency Accreditation of Hospitals (JCAHO) or the Manual for Agency Accreditation (ICAP) shall be deemed to be in compliance with Section 113.50(a);~~
 - 2) Section 113.50;
 - 3) Section 113.60(a), (b), and (c)(2);
 - 4) Section 113.80 (a) through (e);
 - 5) Section 113.90;
 - 6) Section 113.100;
 - 7) Section 113.110(d) through (g) and (i);
 - 8) Section 113.120; and
 - 9) Section 113.130.
- b) Demonstration of current accreditation status shall be achieved by submission of a certificate statement of accreditation and the most recent accreditation report by the agency to the Department.
- c) If the agency's accreditation status changes for any reason, the agency shall notify the Department of that change within 30 days after the effective date of the change.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

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- 1) Heading of the Part: Standards and Licensure Requirements for Community-Integrated Living Arrangements
- 2) Code Citation: 59 Ill. Adm. Code 115
- 3) Section Number: Proposed Action:
115.120 Amended
115.330 Amended
115.420 Amended
- 4) Statutory Authority: Implementing the Community-Integrated Living Arrangements Licensure and Certification Act [210 ILCS 135] and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104] and Section 5 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/5].
- 5) A Complete Description of the Subjects and Issues Involved: Part 115 is being amended to apply deemed status to community providers accredited by the Joint Commission on the Accreditation of Healthcare Organizations, the Council on Accreditation of Services for Families and Children, the Accreditation Council, the Commission on Accreditation of Rehabilitation Facilities and the National Accreditation Council for Agencies Serving the Blind and Visually Handicapped. A definition of "deemed status" has been added to Section 115.120. Section 115.330 has been amended to clarify which Sections of Part 115 are eligible for deemed status and the method by which community agencies can demonstrate current accreditation status. Section 115.420 is being amended to reflect the current address of the Department's Office of Accreditation and Licensure.

Various technical changes are also being made to this Part.

- 6) Will this proposed amendment replace an emergency rule currently in effect? No
 - 7) Does this rulemaking contain an automatic repeal date? No
 - 8) Does this proposed amendment contain incorporation by reference? This rulemaking incorporates by reference the standards of five accrediting organizations.
 - 9) Are there any other proposed amendments pending on this Part? Yes
- | | | |
|------------------------|------------------------|-----------------------------|
| <u>Section Numbers</u> | <u>Proposed Action</u> | <u>IL Register Citation</u> |
| 115.321 | New Section | 20 Ill. Reg. 16045 |
| 115.470 | Amended | 20 Ill. Reg. 13502 |
- 10) Statement of Statewide Policy Objectives: This rulemaking does not impact

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the State Mandates Act [30 ILCS 805].

- 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Any interested person may submit comments, data, views or argument regarding this proposed rulemaking before the expiration of the first 45-day notice period. Submissions must be in writing and directed to:

Judith Hollenberg
Rules Administrator
Department of Mental Health
and Developmental Disabilities
401 Stratton Building
Springfield IL 62765
Telephone (217)785-3313
FAX (217)524-8920

12) Initial Regulatory Flexibility Analysis:

- A) Types of small business affected: Private agencies which operate community-integrated living arrangements licensed by the Department.
B) Reporting, bookkeeping or other procedures required for compliance: None required.
C) Types of professional skills necessary for compliance: No special skills needed.

13) Regulatory Agenda on which this rulemaking was summarized: July 1996

The full text of the Proposed Amendment(s) begins on the next page

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NOTICE OF PROPOSED AMENDMENT(S)

TITLE 59: MENTAL HEALTH
CHAPTER I: DEPARTMENT OF MENTAL HEALTH AND
DEVELOPMENTAL DISABILITIES

PART 115

STANDARDS AND LICENSURE REQUIREMENTS FOR COMMUNITY-INTEGRATED LIVING ARRANGEMENTS

SUBPART A: GENERAL PROVISIONS

Section	Purpose
115.100	Incorporation by reference
115.110	Definitions
115.120	

SUBPART B: SERVICE REQUIREMENTS

Section	Description
115.200	Criteria for participation of individuals
115.210	Criteria for termination of individuals
115.215	Community support team
115.220	Interdisciplinary process
115.230	Medical services and medications
115.240	Individual rights and confidentiality
115.250	

SUBPART C: GENERAL AGENCY REQUIREMENTS

Section	Description
115.300	Environmental management of living arrangements
115.310	Geographic location of community-integrated living arrangements
115.320	Administrative requirements
115.325	Monitoring and evaluation
115.330	Accreditation

SUBPART D: LICENSURE REQUIREMENTS

Section	Description
115.400	Applicability
115.410	Issuing a license and period of licensure
115.420	License application
115.430	Application acceptance and verification
115.440	Non-transferability of license
115.450	Cessation of operations
115.460	License revocation
115.470	Hearings

APPENDIX A Specific Level of Functioning Assessment and Physical Health Inventory

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AUTHORITY: Implementing the Community-Integrated Living Arrangements Licensure and Certification Act [210 ILCS 135] and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104] and Section 5 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/5].

SOURCE: Adopted at 14 Ill. Reg. 10865, effective July 1, 1990; emergency amendment at 14 Ill. Reg. 20550, effective December 5, 1990, for a maximum of 150 days; emergency expired May 18, 1991; amended at 15 Ill. Reg. 8560, effective May 24, 1991; emergency amendment at 16 Ill. Reg. 2676, effective February 1, 1992, for a maximum of 150 days; emergency expired on June 30, 1992; amended at 17 Ill. Reg. 21434, effective November 29, 1993; amended at 21 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL PROVISIONS

Section 115.120 Definitions

For the purpose of this Part, the following terms are defined:

"Abuse." *Any physical injury, sexual abuse or mental injury inflicted on an individual other than by accidental means.* (Section 1-101.1 of the Code);

Physical injury includes all injuries serious enough to require immediate medical treatment by a physician, such as fractures and lacerations which require suturing and all other injuries which because of the circumstances or nature of the injury indicate possible abuse or neglect;

Sexual abuse includes but is not limited to any sexual penetration or sexual conduct between an individual and another person if the individual has been adjudicated legally disabled, or has a guardian, or is unable to understand the nature of the act or is unable to give knowing consent, or is injured, or alleges that there is, or there is evidence of use of force, coercion, or the exchange of money or anything of value; and

Mental injury includes use of words, signs, gestures or other actions by anyone against an individual which intimidates, demeans, harasses, causes emotional anguish or distress, ridicules, threatens, harms or will knowingly incite or precipitate maladaptive behavior on the part of an individual. Mental injury also includes exploitation, which is any act that uses individuals, their resources or their possessions for an agency employee's personal gain or for an agency's benefit.

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"Accreditation." A process establishing that a program complies with nationally-recognized standards of care as set by one of the following:

1997 Hospital Accreditation Standards Accreditation--Manual--for Hospitals (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996 1993);

Standards for Agency Management and Service Delivery Manual--for Agency-Accreditation (Council on Accreditation of Services for Families and Children (COA), 120 Wall Street, 11th Floor, 520 Eighth-Avenue--Suite-2202B, New York, New York 10005, 1996 1991);

1997 Mental--Health Standards for Behavioral Health Care or Standards Manual and Interpretive Guidelines for Employment and Community Support Services (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60182, 1996 1993);

Outcome Based Performance Measures Standards--for-Services--for People--with-Developmental-Disabilities (Accreditation Council for Services--for-Developmentally-Disabled-Persons (Council), 100 West Road, Suite 406, Towson, Maryland 21204, 1993 8199--Professional Piece--Suite-204--Baltimore--Maryland-20795--1999);

Standards Manual and Interpretive Guidelines for Behavior Health for-Organizations-Serving-People-with-Disabilities (Commission on Accreditation of Rehabilitation Facilities (CARF), 101--North Wilmot--Road 4891 East Grant Road, Tucson, Arizona 85711, 1996 1992); or

Education Standards (National Accreditation Council for Agencies Serving the Blind and Visually Handicapped, 15 West 65th Street, New York, New York, 10023, 1994).

"Agency." A community mental health or developmental services organization licensed by the Department which is a sole proprietorship, association, partnership, corporation or organization, public or private, either for profit or not for profit, which certifies community-integrated living arrangements for individuals with a mental disability. (Section 3(b) of the Community-Integrated Living Arrangements Licensure and Certification Act)

"Agency supervision." Either continuous supervision or support or intermittent supervision or support as defined in this Section.

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"Array of services." A range of activities and interventions designed to provide treatment, habilitation, training, rehabilitation and other community integrative supports.

"Authorized agency representative." The administrative head of an agency appointed by the agency's governing body with overall responsibility for fiscal and programmatic management.

"Aversive procedures." The application, contingent on the exhibition of a specific behavior that is not adaptive, of unpleasant or painful stimuli, or stimuli that have a potentially noxious affect.

~~"Bureau--the Department's Bureau of Certification and Licensure--~~

"Certification." An affirmation by an agency that programs operated under this Part meet the Part's standards and provide services to promote community-integrated living.

"Code." The Mental Health and Developmental Disabilities Code (~~Ill. Rev. Stat. 1991 ch. 91-1/27, par. 1-108 et seq.~~) [405 ILCS 5].

"Community-integrated living arrangement (CILA)." A living arrangement certified by an agency where eight or fewer individuals with a mental disability reside under the supervision of the agency and are provided with an array of services. (Section 3(d) of the Community-Integrated Living Arrangements Licensure and Certification Act)

"Community integration" or "integration into the community." On-going participation in community life including at least the following:

The amount of time spent out of the living arrangement in generic (non-disability) related activities such as church, Y.M.C.A., Y.W.C.A., education, library, clubs, shopping and amusements.

Participation in family activities and celebrations such as holidays, birthdays, reunions, communication (telephone and mail) and vacations.

"Community support team (CST)." Staff responsible for providing and arranging for the provision of services specified in the individual integrated services plan for individuals in a community-integrated living arrangement. The team shall be composed of at least one qualified mental health professional or qualified mental retardation professional as defined in this Section, and other mental health and developmental disabilities staff who shall provide community support services in the individual's home or in other community locations where learning, working or socialization occur.

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"Confidentiality Act." The Mental Health and Developmental Disabilities Confidentiality Act (~~Ill. Rev. Stat. 1991 ch. 91-1/27, par. 101 et seq.~~) [740 ILCS 110].

"Consumer representatives." Persons representing the interests of individuals served by an agency such as family members and advocates.

"Continuous supervision or support." Direction or assistance provided to an individual under the auspices of the licensed agency on-site all the hours individuals are present.

"Day." A calendar day, unless otherwise indicated.

"Deemed status." If an agency has been accredited by an approved accrediting body as identified in the definition of "accreditation" in this Section, the Department shall deem the agency to be in substantial compliance with specific Sections of this Part. Deemed status, however, may be nullified by a finding by the Department that the agency is in substantial non-compliance with one or more of the designated Sections.

"Developmental disability." A disability which is attributable to mental retardation, cerebral palsy, epilepsy or autism; or to any other condition which results in an impairment similar to that caused by mental retardation and which requires services similar to those required by ~~mentally-retarded individuals~~ individuals with mental retardation. Such disability must originate before the age of 18, be expected to continue indefinitely, and constitute a substantial handicap. (Section 1-106 of the Code)

"Department." The Department of Mental Health and Developmental Disabilities or successor agency.

"Diagnosis." A category of disability stated in accordance with either the Classification in Mental Retardation (American Association on Mental Retardation, 1719 Kalorama Road, N.W., Washington, D.C. 20009 [1992] edition), or the Diagnostic and Statistical Manual of Mental Disorders, Fourth ~~Third~~ Edition, revised (DSM-IV) ~~III-R~~ (American Psychiatric Association, 1994 1987-edition).

"Director." The Director of the Department of ~~Mental Health and Developmental Disabilities~~.

"Economic self-sufficiency." The managing of financial resources which are needed to satisfy the daily needs of an individual including at least involvement in commerce, such as managing money, comparative shopping, selecting clothes, informed selection of foods, diet and

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purchasing and negotiating.

"Entitlements." Government-related financial benefits available to individuals who qualify on the basis of need, disability and/or income, such as Title XVIII (Medicare) (42 U.S.C.A. 1395b-1 ~~et seq~~ 7 (1995) 1991), Title XIX (Medicaid) (42 U.S.C.A. 1396a ~~et seq~~ 7 (1995) 1991) and Veteran's Administration benefits (38 U.S.C.A. 7 521, 541, 5427 (1995) 1991).

"Equivalency." Evidence to substantiate compliance with requirements of this Part by other means than indicated in this Part.

"Family." The spouse and children and the mother, father, sister and brother of an individual.

"Governing body." The policy-making authority of an agency that establishes policies concerning the agency's operation and the welfare of individuals; provides for the agency's administration by appointing an authorized agency representative to implement its policies; and exercises general oversight of the agency's operation, its fiscal affairs and programmatic content to implement the organization's mission.

"Guardian." The plenary or limited guardian or conservator of the individual appointed by the court for an individual over age 18 so long as the limited guardian's duties encompass concerns related to service requirements, or the natural or adoptive parent of a minor or a person acting as a parent of a minor.

"Habituation." *An effort directed toward the alleviation of a developmental disability or toward increasing the level of physical, mental, social or economic functioning of an individual with a developmental disability. Habituation may include, but is not limited to, diagnosis, evaluation, medical services, residential care, day care, special living arrangements arrangement, training, education, employment related services, protective services, counseling and other services provided to individuals with a developmental disability by developmental disabilities programs.* (Section 1-111 of the Code)

"Imminent risk." A situation in which individuals being supervised by an agency are or may be subject to illness, mental or physical injury and which is not immediately correctable such as environmental or safety hazards.

"Independence in daily living." Demonstrated ability of an individual to provide for his or her own basic care without outside assistance including at least the following:

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Vocational development outside the living arrangement which enables individuals to participate in the workforce such as using on-the-jobs skills, riding a bus and crossing streets.

Participation in citizenship activities such as awareness of community norms, voting and volunteering in community projects.

"Individual" or "individuals." A person or persons who receives or receive community-integrated living arrangement services.

"Individual integrated services plan" or "services plan." A written plan which includes an assessment of the individual's strengths and needs, a description of the array of services needed regardless of availability, objectives for each service, the role of the individual or guardian, significant others and family in the implementation of the plan when indicated, an anticipated timetable for the accomplishment of objectives, and the name of the person or persons responsible for the implementation of the plan.

"Individual record." Materials kept by an agency in the course of providing services to a mentally disabled individual who is receiving services in a community-integrated living arrangement concerning the individual and the services provided.

"Informed consent." Permission freely granted by the individual or guardian based on full disclosure to the individual or guardian of the benefits and/or liabilities of participation in specific procedures and/or services, including releases of information, as part of the individual's services plan.

"Interdisciplinary process." A set of steps or systems initiated to assess a mentally disabled individual's strengths and needs with input from individuals requesting and/or receiving services and from the disciplines providing or targeted to provide services in order to collaboratively develop and implement an individual integrated services plan, and to review and/or update the plan. Persons participating in the process shall include, at a minimum, the individual and his or her legal guardian, the individual's family, unless a legally competent individual chooses not to have the family involved or the family refuses to be involved, a qualified mental retardation professional or qualified mental health professional and other members of the community support team.

"Intermittent supervision or support." Direction or assistance provided to an individual under the auspices of a licensed agency less than 24-hours per day. When staff are not on-site, supervision shall be provided by means of 24-hour on-call availability and by a variety

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of alternatives or supports, such as non-disabled roommates, paid neighbors, non-paid family members and other formal or informal arrangements.

"Linkage." Person-to-person contact to assure that the supports and services needed by the individual and specified in the individual integrated services plan are obtained. The qualified mental retardation professional, qualified mental health professional or mental health professional under the supervision of the qualified mental health professional shall be responsible for assuring linkage.

"Living arrangement." An apartment, private home, multi-unit dwelling or where an individual has chosen to live or where the individual's guardian has chosen for him or her to live.

"Mental disability" or "mentally disabled." A developmental disability, a mental illness, or both.

"Mental health professional (MHP)." A mental health professional who provides services under the supervision of a qualified mental health professional(s), as defined below, in providing services specified in Subpart B of this Part to an individual and his or her family, as necessary. The mental health professional must possess a bachelor's degree in social work, sociology, psychology, counseling, rehabilitation, or art and recreation therapy or possess a practical nurse license pursuant to the Illinois Nursing Act of 1987 (4115--Rev-Stat--1991--ch--117--par--3501--et--seq) [225 ILCS 65] or have a minimum of five years of supervised experience in a mental health service.

"Mental illness." A condition that is characterized by the presence of a major mental disorder as classified in the Diagnostic and Statistical Manual of Mental Disorders, Fourth ~~Third~~ Edition--~~revised~~ (BSM-~~iii~~-R7 (DSM-IV)) (American Psychiatric Association, 1994 ~~1987~~ ~~edition~~), excluding alcohol and substance abuse, Alzheimer's disease, and other forms of dementia based on organic or physical disorders and where the individual is assessed using form DMHDD-1215, "Specific Level of Functioning Assessment and Physical Health Inventory," (SLOF) to be substantially disabled due to mental illness in the areas of self-maintenance, social functioning, activities of community living and work skills, and the disability specified is expected to be present for a period of not less than one year.

"Mental retardation." Significantly ~~Significant~~ subaverage general intellectual functioning which exists concurrently with impairment in adaptive behavior and which originates before the age of 18 years. (Section 1-116 of the Code)

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"Moral turpitude." Moral quality of being inherently base, depraved, vile or wicked.

"Natural environment." Locations and settings where an individual lives, works and socializes and carries out activities of daily living.

"Neglect." Failure to provide adequate medical or personal care or maintenance which failure results in physical or mental injury (as clarified in the definition of "Abuse" in this Section) to an individual or in the deterioration of an individual's physical or mental condition. (Section 1-117.1 of the Code)

"Notice of violation." A report submitted to an agency by OAL the Department's Bureau of Certification and Licensure listing the agency's deficiencies with this Part noted during a survey.

"OAL." The Department's Office of Accreditation and Licensure.

"Plan of correction." A written plan submitted by an agency to OAL the Department's Bureau of Certification and Licensure, in response to a notice of violation, which describes the steps the agency will take in order to bring a program or services into compliance, and the time-frames for completion of each step.

"Progress notes." Narrative documentation in an individual's record of service provision and its relationship to the individual integrated services plan.

"Psychotropics." Drugs used for antipsychotic, antidepressant, antimanic and/or anti-anxiety purposes as listed in the AMA Drug Evaluations (American Medical Association, 1993 ~~edition~~) or the Physician's Desk Reference (PDR) (Medical Economic Company (1996) 7 1992, published annually).

"Qualified mental health professional (QMHP)." One of the following:

A physician licensed under the Medical Practice Act of 1987 (4115--Rev--Stat--1991--ch--117--par--4400--i--et--seq) [225 ILCS 60] to practice medicine or osteopathy with training in mental health services or one year of clinical experience, under supervision, in treating problems related to mental illness, or specialized training in the treatment of children and adolescents;

A psychiatrist (a physician licensed under the Medical Practice Act of 1987) who has successfully completed a training program in psychiatry approved by the American Medical Association or the

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American Osteopathic Association or other training program identified as equivalent by the Department;

A psychologist licensed under the Clinical Psychologist Licensing Act (1991-Rev-Stat-1991-Ch-117-Par-551-et-seq) [225 ILCS 15] with specialized training in mental health services;

A social worker possessing a individual's or doctoral degree in social work and licensed under the Clinical Social Work and Social Work Practice Act (1991-Rev-Stat-1991-Ch-117-Par-651-et-seq) [225 ILCS 20] with specialized training in mental health services;

A registered nurse licensed under the Illinois Nursing Act of 1987 (1991-Rev-Stat-1991-Ch-117-Par-350-et-seq) [225 ILCS 65] with at least one year of clinical experience in a mental health service or a individual's degree in psychiatric nursing;

An occupational therapist registered pursuant to the Illinois Occupational Therapy Practice Act (1991-Rev-Stat-1991-Ch-117-Par-370-et-seq) [225 ILCS 75] with at least one year of clinical experience in a mental health setting; or

An individual possessing a individual's or doctoral degree in counseling and guidance, rehabilitation counseling, social work, vocational counseling, psychology, pastoral counseling or family therapy, or related field, who has successfully completed a practicum and/or internship which includes a minimum of 1,000 hours, or who has one year of clinical experience under the supervision of a qualified mental health professional or who is a licensed social worker holding a individual's degree with two years of experience in mental health services.

"Qualified mental retardation professional (QMRP)." A QMRP must:

Have at least one year of experience working directly with individuals with mental retardation or other developmental disabilities and be one of the following:

A doctor of medicine or osteopathy licensed pursuant to the Medical Practice Act of 1987;

A registered nurse licensed pursuant to the Illinois Nursing Act of 1987;

An occupational therapist or occupational therapist assistant certified by the American Occupational Therapy

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Association or other comparable body (Illinois Occupational Therapy Practice Act);

A physical therapist certified by the American Physical Therapy Association or other comparable body (Illinois Physical Therapy Act (1991-Rev-Stat-1991-Ch-117-Par-4251-et-seq) [225 ILCS 90]);

A physical therapist assistant registered by the American Physical Therapy Association or a graduate of a two-year college-level program approved by the American Physical Therapy Association or comparable body;

A psychologist with at least a individual's degree in psychology from an accredited school (Clinical Psychologist Licensing Act);

A social worker with a bachelor's degree from a college or university or graduate degree from a school of social work accredited or approved by the Council on Social Work Education or another comparable body (the Clinical Social Work and Social Work Practice Act);

A speech-language pathologist or audiologist with a certificate of Clinical Competence in Speech-Language Pathology or Audiology granted by the American Speech Language Hearing Association or comparable body or meeting the education requirements for licensure and being in the process of accumulating the supervised experience required for licensure (the Illinois Speech-Language Pathology and Audiology Practice Act (1991-Rev-Stat-1991-Ch-117-Par-7901-et-seq) [225 ILCS 110]);

A professional recreation staff person with a bachelor's degree in recreation or in a specialty area such as art, dance, music or physical therapy;

A professional dietitian registered by the American Dietetics Association;

A human services professional with a bachelor's degree in a human services field, including but not limited to sociology, special education, rehabilitation counseling and psychology.

"Quality assurance." A systematic and objective approach to monitoring and evaluating the appropriateness, adequacy and quality of services in order to identify and resolve problems.

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"Residence." See "living arrangement."

"Seclusion." *Sequestration by placement of an individual alone in a room from which he or she has no means of leaving. When an individual is placed in a behavior modification program pursuant to his or her individual integrated services plan, he or she may be removed from a situation that affords positive reinforcement to an area where reinforcement is not available for a reasonable period of time not to exceed 30 minutes and such restrictions shall not constitute seclusion.* (Section 1-126 of the Code)

"Self-administration of medications." An individual's ability to correctly take prescribed medications independently or with verbal prompts.

"Skills training." Activities which focus on the development of daily living skills which enable individuals to achieve independent functioning and economic self-sufficiency.

"Substantial compliance." An evaluation result that determines that a surveyed program or service meets the requirements set forth in this Part, or, when deficient, the program has documented a plan of correction to rectify any deficiency, or has an approved equivalency or waiver for it.

"Survey." A process to determine the degree of compliance with this Part which an agency has maintained. This includes surveyor observation and an on-site examination of the following: policies, procedures, records of individuals, written plans, and the physical plant. Interviews of individuals and staff and observation of a sample of CILAs are also a part of the survey.

"Tardive dyskinesia." An abnormal involuntary movement disorder associated with the long-term use of antipsychotic medications. It may be persistent or transient and is characterized by a variable mixture of facial, ocular, oral, lingual, truncal or limb movements.

"Time-out." Contingent removal from a situation in which reinforcement occurs into a situation from which reinforcement does not occur, for a reasonable period of time not to exceed 30 minutes.

"Treatment." An effort to accomplish an improvement in the mental condition or related behavior of an individual. Treatment includes, but is not limited to, hospitalization, partial hospitalization, outpatient services, examination, diagnosis, evaluation, care, training, psychotherapy, pharmaceuticals and other services provided for individuals by mental health agencies or psychiatric hospitals.

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(Section 1-128 of the Code)

"Waiver." An action by the Department in which exceptions to this Part are granted on application by an agency for a period not to exceed the duration of the current license.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

SUBPART C: GENERAL AGENCY REQUIREMENTS

Section 115.330 Accreditation

a) Agencies ~~Providers~~ demonstrating accrediting status under any of the standards of the accrediting organizations identified in the definition of "accreditation" in Section 115.120 of this Part granted deemed status for the following Sections of this Part: either the ~~Standards for Services for People with Developmental Disabilities (Council)~~, ~~Standards Manual for Organizations Serving People with Disabilities (GARF)~~, ~~Council on Accreditation of Services for Families and Children (COA)~~, ~~Mental Health Standards (JCAHO)~~, or ~~Accreditation Manual for Hospitals (JCAHO)~~ may be deemed to be in compliance with Section 115.320(a) of this Part:

- 1) Section 115.220(b) through (f);
 - 2) Section 115.230(a) through (d), (e)(1) through (e)(3), (e)(4)(A) through (e)(4)(C), (e)(4)(E) and (F), (g) through (i);
 - 3) Section 115.240(a) through (d) and (g) through (i);
 - 4) Section 115.250(d) and (e), (g) and (h); and
 - 5) Section 115.320(a) through (c), (e), (f) and (h).
- b) Demonstration of current accreditation status shall be achieved by submission of a certificate statement of accreditation and the most recent accreditation report by the agency to the Department.
- c) If the agency's accreditation status changes for any reason, the agency shall notify the Department of that change within 30 days after the effective date of the change.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

SUBPART D: LICENSURE REQUIREMENTS

Section 115.420 License application

a) Forms

- 1) Agencies shall obtain application forms to operate CILAs under this Part by writing to: ~~Department of Mental Health and Developmental Disabilities, 4201 North Oak Park, Chicago, IL~~

DEPARTMENT OF MENTAL HEALTH
AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED AMENDMENT(S)

60634-Attention:--Bureau-of-Certification-and-Licensure:

Office of Accreditation and Licensure

Department of Mental Health and

Developmental Disabilities

405 Stratton Building

Springfield, IL 62765

- 2) The application shall require agencies to certify that individuals being served and programs and services provided in CIAs comply with Section 4 of the Community-Integrated Living Arrangements Licensure and Certification Act, Chapter 2 of the Code, the Act and this Part. In addition, the application shall request information about:

- A) The agency including the type of ownership, the names of all owners, partners and stockholders;
 - B) The individuals being served or to be served in the CIAs supervised by the agency including their disability and diagnosis, the kind of supervision received and whether individuals are in living arrangements owned or leased by the agency. Also, the application shall require agencies to identify if individuals are visually or hearing impaired and/or non-ambulatory;
 - C) The living arrangements used as CIAs including site addresses and telephone numbers.
- 3) The authorized agency representative shall sign and date the application forms.

b) Fees

The Department shall charge a licensure fee up to \$200 as provided by Section 4(d) of the Community-Integrated Living Arrangements Licensure and Certification Act.

c) Renewal

- 1) On Department notification, each licensed agency shall submit a signed and dated renewal application at least 120 days prior to expiration of the license.
- 2) Agencies in substantial compliance with this Part shall be relicensed for an additional three-year period.
- 3) If the Department does not approve an application for license renewal, it shall notify the applicant in writing 30 days prior to the expiration of the license.
- 4) Notice of the Department's decision not to renew a license shall include a clear and concise statement of the reason on which the determination is based and notice of the opportunity for a hearing.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

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NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Department of Personnel
- 2) Code Citation: 80 Ill. Adm. Code 420
- 3)

<u>Section Number</u>	<u>Proposed Action:</u>
420.10	Amendment
420.415	New Section
420.665	New Section
420.680	Amendment
420.825	New Section
- 4) Statutory Authority: Implementing and authorized by Section 10 of the Secretary of State Merit Employment Code [15 ILCS 310/10].
- 5) A Complete Description of the Subjects and Issues Involved: These rules respond to a Secretary of State Merit Commission order requiring employment standards for sworn personnel (Secretary of State police) in positions on inter-agency assignments, e.g., the task force on auto theft comprised of SOS police, state troopers, and local law enforcement.
- 6) Will this proposed rule replace an emergency rule currently in effect?
Yes
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Do these proposed amendments contain incorporation by reference? No
- 9) Are there any other amendments pending on this Part? No
- 10) Statement of Statewide Policy Objectives: This rulemaking does not affect units of local government.
- 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking. Written comments may be submitted within 45 days to:

Deanna Patton
Department of Personnel
Room 196, Howlett Building
Springfield, IL 62756
217/782-4783
- 12) Initial Regulatory Flexibility Analysis:
 - A) Types of small businesses affected: This rule will not affect any business, not for profit entity, or unit of government.
 - B) Reporting, bookkeeping or other procedures required for compliance: No additional reporting requirements are imposed.

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C) Types of professional skills necessary for compliance: No professional skills are relevant to this rulemaking other than those relating to the promotion of sworn personnel described herein.

- 13) State reason(s) for this rulemaking if it was not included in either of the two most recent regulatory agendas: This rule was not included on either of the 2 most recent agendas because: The Merit Commission order was not issued until December 11, 1996.

The full text of the proposed amendments is identical to the emergency amendment text located at page _____:

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NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Issuance of Licenses

2) Code Citation: 92 Ill. Adm. Code 1030

3) Section Numbers:
1030.16 Proposed Action
1030.18 Amendment

- 4) Statutory Authority: Section 2-104(b) of the Illinois Vehicle Title and Registration Law of the Illinois Vehicle Code [625 ILCS 5/2-104(b)] and Article I of the Illinois Driver Licensing Law of the Illinois Vehicle Code [625 ILCS 5/Art. I].

- 5) A Complete Description of the Subjects and Issues Involved: This rulemaking is being proposed to incorporate the changes to Sections 6-201, 11-408 and 6-116.5 of the Illinois Vehicle Code pursuant to P.A. 89-584.

- 6) Will this proposed rulemaking replace an emergency rule currently in effect? No

- 7) Does this rulemaking contain an automatic repeal date? No

- 8) Does this proposed rulemaking contain incorporations by reference? No

- 9) Are there any other amendments pending on this part? No

- 10) Statement of Statewide Policy Objective: This rulemaking will have no effect on local units of government.

- 11) Time, place and manner in which interested persons may comment on this proposed rulemaking: The Secretary of State will fully consider all comments received within 45 days after the date this notice is published. All comments must be in writing and should be sent to:

Mark A. Novak
Assistant Counsel to the Secretary
2701 S. Dirksen Parkway
Springfield, IL 62723
217/782-5356

- 12) Initial Regulatory Flexibility Analysis: After careful consideration, the Secretary of State does not feel this proposed rulemaking will affect any types of small businesses.

- 13) Regulatory Agenda on which this rulemaking was summarized: January 1996

The full text of the proposed rule begins on the next page:

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NOTICE OF PROPOSED AMENDMENTS

TITLE 92: TRANSPORTATION
CHAPTER II: SECRETARY OF STATE

PART 1030

ISSUANCE OF LICENSES

Section	
1030.10	What Persons Shall Not be Licensed or Granted Permits
1030.11	Procedure for Obtaining a Driver's License
1030.13	Denial of License or Permit
1030.15	Cite for Re-examination
1030.17	Errors in Issuance of Driver's License/Cancellation
1030.20	Classification of Drivers-References
1030.30	Classification Standards
1030.40	Fifth Wheel Equipped Trucks
1030.50	Bus Driver's Authority, Religious Organization and Senior Citizen Transportation
1030.55	Commuter Van Driver Operating a For-Profit Ridesharing Arrangement
1030.60	Third-Party Certification Program
1030.63	Religious Exemption for Social Security Numbers
1030.65	Instruction Permits
1030.70	Driver's License Testing/Vision Screening
1030.75	Driver's License Testing/Vision Screening with Vision Aid Arrangements Other Than Standard Eye Glasses or Contact Lens(es)
1030.80	Driver's License Testing/Written Test
1030.81	Endorsements
1030.84	Vehicle Inspection
1030.85	Driver's License Testing/Road Test
1030.86	Multiple Attempts/Road Test
1030.88	Exemption of Facility Administered Road Test
1030.89	Temporary Licenses
1030.90	Requirement For Photograph and Signature of Licensee on Driver's License
1030.91	Disabled Person/Handicapped Identification Card
1030.92	Restrictions
1030.93	Restricted Local Licenses
1030.94	Duplicate or Corrected Driver's License or Instruction Permit
1030.95	Diplomatic and Consular Licenses
1030.96	Restricted Commercial Driver's License
1030.97	Invalidation of a Driver's License or Permit
1030.98	School Bus Commercial Driver's License
1030.100	Anatomical Gift Donor
1030.110	Emergency Medical Information Card
1030.115	Change-of-Address
1030.120	Issuance of a Probationary License
1030.130	Grounds for Cancellation of a Probationary License
APPENDIX A	Questions Asked of a Driver's License Applicant
APPENDIX B	Acceptable Identification Documents

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AUTHORITY: Implementing Article I of the Illinois Driver Licensing Law of the Illinois Vehicle Code [625 ILCS 5/Ch. 6, Art. I] and authorized by Section 2-104(b) of the Illinois Vehicle Title and Registration Law of the Illinois Vehicle Code [625 ILCS 5/2-104(b)].

SOURCE: Filed March 30, 1971; amended at 3 Ill. Reg. 7, p. 13, effective April 2, 1979; amended at 4 Ill. Reg. 27, p. 422, effective June 23, 1980; amended at 6 Ill. Reg. 2400, effective February 10, 1982; codified at 6 Ill. Reg. 12674; amended at 9 Ill. Reg. 2716, effective February 20, 1985; amended at 10 Ill. Reg. 303, effective December 24, 1985; amended at 10 Ill. Reg. 18182, effective October 14, 1986; amended at 11 Ill. Reg. 9331, effective April 28, 1987; amended at 11 Ill. Reg. 18292, effective October 23, 1987; amended at 12 Ill. Reg. 3027, effective January 14, 1988; amended at 12 Ill. Reg. 13221, effective August 1, 1988; amended at 12 Ill. Reg. 16915, effective October 1, 1988; amended at 12 Ill. Reg. 19777, effective November 15, 1988; amended at 13 Ill. Reg. 5192, effective April 1, 1989; amended at 13 Ill. Reg. 7808, effective June 1, 1989; amended at 13 Ill. Reg. 12880, effective July 19, 1989; amended at 13 Ill. Reg. 12978, effective July 19, 1989; amended at 13 Ill. Reg. 13898, effective August 22, 1989; amended at 13 Ill. Reg. 15112, effective September 8, 1989; amended at 13 Ill. Reg. 17095, effective October 18, 1989; amended at 14 Ill. Reg. 4570, effective March 8, 1990; amended at 14 Ill. Reg. 4908, effective March 9, 1990; amended at 14 Ill. Reg. 5183, effective March 21, 1990; amended at 14 Ill. Reg. 8707, effective May 16, 1990; amended at 14 Ill. Reg. 9246, effective May 16, 1990; amended at 14 Ill. Reg. 9498, effective May 17, 1990; amended at 14 Ill. Reg. 10111, effective June 11, 1990; amended at 14 Ill. Reg. 10510, effective June 18, 1990; amended at 14 Ill. Reg. 12077, effective July 5, 1990; amended at 14 Ill. Reg. 15487, effective September 10, 1990; amended at 15 Ill. Reg. 15783, effective October 18, 1991; amended at 16 Ill. Reg. 2182, effective January 24, 1992; emergency amendment at 16 Ill. Reg. 12228, effective July 16, 1992, for a maximum of 150 days; emergency expired on December 13, 1992; amended at 16 Ill. Reg. 18087, effective November 17, 1992; emergency amendment at 17 Ill. Reg. 1219, effective January 13, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 2025, effective February 1, 1993; amended at 17 Ill. Reg. 7065, effective May 3, 1993; amended at 17 Ill. Reg. 8275, effective May 24, 1993; amended at 17 Ill. Reg. 8522, effective May 27, 1993; amended at 17 Ill. Reg. 19315, effective October 22, 1993; amended at 18 Ill. Reg. 1591, effective January 14, 1994; amended at 18 Ill. Reg. 7478, effective May 2, 1994; amended at 18 Ill. Reg. 16457, effective October 24, 1994; amended at 19 Ill. Reg. 10159, effective June 29, 1995; amended at 20 Ill. Reg. 3891, effective February 14, 1996; emergency amendment at 20 Ill. Reg. 8358, effective June 4, 1996, for a maximum of 150 days; emergency amendment repealed in response to an objection of the Joint Committee on Administrative Rules at 20 Ill. Reg. 14279; amended at 21 Ill. Reg. _____, effective _____.

Section 1030.16 Physical and Mental Evaluation

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- a) For purpose of this Section the following definitions shall apply:
- 1) "Adjudication of Disability" - an order by a court of competent jurisdiction declaring a person, because of mental deterioration or physical incapacity, is not fully able to manage his person or estate pursuant to Sections 11a-2 and 11a-3 of the Probate Act of 1975 [755 ILCS 5/11a-2 and 5/11a-3].
 - 2) "Cancellation" - the annulment or termination by formal action of the Secretary of a person's driver's license because the licensee is no longer entitled to such license in accordance with Section 1-110 of the Illinois Vehicle Code and 6-201 of the Illinois Drivers Licensing Law of the Illinois Vehicle Code [625 ILCS 5/1-110 and 5/6-201].
 - 3) "Competent Medical Specialist" - a person licensed under the Medical Practice Act [225 ILCS 60], or similar law of another jurisdiction, to practice medicine in all of its branches [225 ILCS 60-1-1].
 - 4) "Current Medical Report" - any medical report completed within three (3) months after of receipt by the Department which is signed and dated by a competent medical specialist.
 - 5) "Department" - the Department of Driver Service of the Office of the Secretary of State.
 - 6) "Department of Administrative Hearing" - the Department of Administrative Hearing of the Office of the Secretary of State.
 - 7) "Driver" - any person who is currently licensed to operate a motor vehicle or any person applying for or renewing a driver's license.
 - 8) "Driver Rehabilitation Specialist" - a person who possesses an undergraduate degree in rehabilitation, education, health, safety, therapy, or related profession (or equivalent of 8 years of experience in driver rehabilitation); possesses a current Association of Driver Educators for the Disabled (ADED) Certification as a Driver Rehabilitation Specialist (consisting of successful completion of 100 clock hours of educational experience, in combination with safety and medical aspects of disabilities; a minimum of 30 hours must be gained from attending ADED approved courses or workshops).
 - 9) "Favorable Medical Report" - a current medical report which has been completed in its entirety which does not require additional information and/or clarification or is not medically questionable. A favorable medical report specifies a professional opinion from the competent medical specialist that the driver is medically fit to safely operate a motor vehicle.
 - 10) "Firsthand Knowledge" - information gleaned directly from its source.
 - 11) "Illinois Medical Advisory (Board)" - a panel consisting of at least 9 physicians appointed by the Secretary pursuant to Section 6-902 of the Driver License Medical Review Law of 1992 [625 ILCS 5/6-902].

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- 12) "Incomplete Medical Report" - a medical report which has not been completed in its entirety, or a medical agreement which has not been signed and dated by the driver. Examples of an incomplete medical report include, but are not necessarily limited to: a medical report which does not include the name, address, signature or professional license number of the competent medical specialist, or the report which is not dated; or contains illegible information; or fails to answer any of the questions contained within the report.
- 13) "Law Enforcement" - police officer, sheriff, coroner, municipal prosecutor, or state's attorney.
- 14) "Mandatory Law Enforcement Report" - an unsigned message received by teletypewriter or computer by law enforcement containing the same information as the form designed by the Department. The message shall be directed to the Department and contain the date and name and address of the source sending the message. The message must also contain the name, address, date of birth and driver's license number, if known, of the driver.
- 15) ~~14~~ "Medical Agreement" - an agreement signed and dated by the driver, maintained in conjunction with a medical report and shall include the following conditions and/or information:
 - A) a condition that the driver remain under the care of his/her competent medical specialist;
 - B) a condition that the driver adhere to the treatment and/or medication;
 - C) authorization by the driver to the competent medical specialist to report any change in the driver's condition that would impair the driver's ability to operate a motor vehicle;
 - D) possible consequences for failing to abide by any or all of the conditions contained in the medical agreement.
- 16) ~~15~~ "Medical Denial" - an entry on a person's driving record by the Department indicating a driver may not renew his/her driver's license until the conditions set forth by the Department are met pursuant to this Section or Section 6-103 of the Illinois Vehicle Code [625 ILCS 5/6-103].
- 17) ~~16~~ "Medical Report" - a confidential medical questionnaire designed by the Department and approved by the Illinois Medical Advisory Board, or a statement on letterhead made by a competent medical specialist containing the same information as the form designed by the Department. The medical report shall be directed to the Department and contain the date the competent medical specialist completed the report and the name, address, signature and professional ~~profession~~ license number of the competent medical specialist. The report must also contain the name, address, date of birth and driver's license number, if known of the driver. A medical agreement upon execution by the driver shall be incorporated into and maintained on file with the

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driver's medical report.

18) ~~17~~ "Medical Restriction Card" - a card designed and issued by the Department which describes and explains the limitations and/or conditions noted in the restriction area of a person's driver's license. The driver must abide by all the medical restriction placed on his/her license as describe on the medical restrictions card, and, upon receipt of the card from the Department, the driver must carry the medical card with his/her driver's license at all times.

19) ~~18~~ "Medical Disorder or Disability" - a scientifically recognized condition which may medically impair a person's mental health to the extent he/she is unable to safely operate a motor vehicle.

20) ~~19~~ "Motor Vehicle Departments of Foreign States" - departments in other states that issue driver's licenses.

21) ~~20~~ "National Driver Register (NDR)" - files on drivers maintained by the U.S. Department of Transportation, National Highway Traffic Safety Administration.

22) ~~21~~ "Official Investigation" - the act of examining and inquiring into an occurrence or circumstance with care and accuracy by a duly authorized member of a local, state or federal agency while acting in his/her professional capacity.

23) ~~22~~ "Physical Condition or Disability" - a scientifically recognized condition which may medically impair a person's physical health to the extent he/she is unable to safely operate a motor vehicle.

24) ~~23~~ "Preliminary Favorable Medical Report" - a current medical report or a current written statement on official letterhead which is signed and dated by a competent medical specialist indicating in his/her professional opinion the driver is medically fit to safely operate a motor vehicle; however, additional information and/or clarification or consultation is needed.

25) ~~24~~ "Problem Driver Pointer System" - a pointer file consisting of an index of problem drivers (as determined by adverse driver's license actions) that is maintained by a driver's home state (State of Record) and is accessed by other states (State of Inquiry) to determine if driver's license applicants are eligible.

26) ~~25~~ "Questionable Medical Report" - a medical report which contains medical information which raises some reasonable doubt regarding the driver's medical ability to safely operate a motor vehicle. Examples of questionable medical reports include, but are not necessarily limited to:

- A) a medical report which indicates the driver has experienced an attack of unconsciousness within the past six (6) months; or
- B) the medical report lacks a professional opinion indicating whether or not the driver is medically fit to safely operate

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a motor vehicle; or

C) the medical report was signed and/or completed by someone other than a competent medical specialist; or

D) the competent medical specialist recommends the driver have a driver's license, however, expresses reservations about the driver's ability to safely operate a motor vehicle.

27) ~~26~~ "Rescind Order" - a removal by formal action of an order canceling or medically denying issuance of a driver's license to a person.

28) ~~27~~ "Secretary of State Employee" - all supervisory personnel with the Department of Driver Service and the Department of Administrative Hearing.

29) "Self-Admission" - self-admission of the driver that he/she has a mental disorder/disability and/or physical condition or disability that may impair his/her ability to safely operate a motor vehicle or that is likely to cause a loss of consciousness.

30) ~~28~~ "Termination of an Adjudication of Disability Order" - an order by a court of competent jurisdiction terminating an adjudication of disability of the driver pursuant to Sections 11a-2 and 11a-3 of the Probate Act of 1975 [755 ILCS 5/11a-2 and 5/11a-3].

31) ~~29~~ "Termination Order" - the ending of an order canceling or medically denying the issuance of a driver's license to a person.

32) ~~30~~ "Unfavorable Medical Report" - a medical report signed and completed by a competent medical specialist containing his/her professional opinion that due to a physical and/or mental disorder/disability the driver is not medically fit to operate a motor vehicle.

33) ~~31~~ "Unfit to Stand Trial Order" - an order by a court of competent jurisdiction whereby a defendant, because of his/her mental or physical condition, he/she is unable to understand the nature and purpose of the proceeding against him/her or to assist in his/her defense pursuant to Article 104 of the Code of Criminal Procedure [725 ILCS 5/Art. 104].

34) ~~32~~ "Voluntary Self-Admission" - self-admission of the driver that he/she has a mental disorder/disability and/or physical condition or disability that may impair his/her ability to safely operate a motor vehicle.

b) The Department shall require a driver to submit a medical report from a competent medical specialist when:

1) the driver answers in the affirmative to any question on the driver's license application regarding physical or mental health pursuant to Section 6-109 of the Illinois Vehicle Code [625 ILCS 5/6-109].

2) the Department receives written comments and/or recommendations based upon firsthand knowledge or pursuant to an official investigation that brings into question a driver's physical or mental ability to safely operate a motor vehicle. Such comments

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and/or recommendations are confidential and must be submitted on official letterhead or a form designed by the Department and signed by one of the following source:

- A) a competent medical specialist;
- B) a law enforcement official;
- C) a member of the judiciary;
- D) a member of the Board;
- E) the National Driver Register;
- F) a Secretary of State employee;
- G) an employee of the U.S. Department of Transportation, Office of Motor Carriers;
- H) motor vehicle departments of foreign states;
- I) driver rehabilitation specialist;
- J) ~~voluntary~~ self-admission; or
- K) problem driver pointer system.

3) The Department receives an Adjudication of Disability court order where the court appointed a guardian to manage the financial affairs or the estate of the person.

4) The driver is renewing a driver's license which at the time of issuance required the driver to submit a medical report, except as provided in subsection (m) of this Section.

5) The Department receives a mandatory law enforcement report message based on first-hand knowledge or pursuant to an official investigation that brings into question a driver's physical or mental ability to safely operate a motor vehicle.

c) The Department shall cancel or medically deny the issuance of a driver's license upon receipt of an Adjudication of Disability order where the court appointed a guardian to make responsible decisions concerning the care of the person or of both the person and his/her financial affairs or estate, or the Department receives an order finding the driver unfit to stand trial.

1) The notice of cancellation shall be mailed to the court appointed guardian of the driver.

2) The cancellation order shall remain in effect until the court issues an order terminating the adjudication of disability; or the driver is found fit to stand trial.

3) After receipt of an order of restoration and prior to the termination of the cancellation, the Department shall request a favorable medical report. Upon receipt of a favorable medical report, the cancellation order shall be terminated and the person may reapply for a driver's license as outlined in Section 6-106 of the Illinois Vehicle Code [625 ILCS 5/6-106].

d) The Department shall cancel or medically deny a driver pursuant to Sections 6-103(8) and 6-201(a)(5) of the Illinois Vehicle Code [625 ILCS 5/6-103(8) and 6-201(a)(5)], if one or more of the sources listed in subsection (b)(2) of this Section submits a mandatory law enforcement report or a signed, written notification on official letterhead to the Department that based upon firsthand knowledge or

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pursuant to an official investigation the person was the driver of a motor vehicle involved in any type of accident or incident resulting from a seizure, an attack of unconsciousness or a blackout.

1) Following a cancellation or denial of a license pursuant to this subsection (d), the driver must submit a medical report to be forwarded to the Board and abide by all subsequent requests by either the Department or the Board, if any, for further information and/or clarification prior to being eligible to reapply for a driver's license.

2) Any medical reports and/or other information concurrently or subsequently received by the Department shall be referred along with the entire case to the Board for determination as to the driver's ability to safely operate a motor vehicle as outlined in subsection (k) of this Section.

e) The Department is authorized to cancel pursuant to Section 6-201(a)(8) of the Illinois Vehicle Code any driver's license or permit upon determining that a driver failed to report to the Secretary of State the existence of a medical condition that is likely to cause loss of consciousness or loss of ability to safely operate a motor vehicle within 10 days after the driver becoming aware of the condition pursuant to Section 6-116.5 of the Illinois Vehicle Code [625 ILCS 5/6-116.5]. If a driver is canceled pursuant to this subsection (e) and a favorable medical report is subsequently received, the cancellation shall be rescinded, provided the driver is otherwise eligible for the driver's license.

f) e) When a driver is required to submit a medical report pursuant to subsections (b)(2) and (3) of this Section, the Department shall furnish the appropriate form to be completed by a competent medical specialist to the driver. The driver must then resubmit the completed medical report to the Department within 20 days after issuance.

1) If a medical report is not received by the Department within the above specified time, the driver shall be canceled or medically denied a driver's license.

2) If a driver is canceled pursuant to this subsection (f) Subsection and a preliminary favorable or favorable medical report is subsequently received, the cancellation shall be rescinded, provided an unfavorable report is not received in the interim.

g) f) If a driver fails to submit a medical report pursuant to subsection (b)(4) of this Section, the Department shall cancel or medically deny the driver pursuant to Sections 6-103(8) and 6-201(a)(5) of the Illinois Vehicle Code. If the Department subsequently receives a preliminary favorable or favorable report, the cancellation shall be rescinded, provided an unfavorable report is not received in the interim.

h) g) If, pursuant to subsection (b) of this Section, the Department receives a favorable medical report, the Department shall issue or renew the person's driver's license, unless the driver is otherwise

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- ineligible ~~for the same~~.
- 1)h If, pursuant to subsection (b) of this Section, the Department receives an unfavorable medical report, the Department shall cancel or medically deny the driver pursuant to Section 6-103(8) and 6-201(a)(5) of the Illinois Vehicle Code.
- 1)h If, pursuant to subsection (b) of this Section, the Department receives a preliminary favorable report, the Department shall issue or renew the person's driver's license, unless the driver is otherwise ineligible ~~for the same~~. The Department shall then make a further determination as to the type of information and/or clarification that is needed in order to finish processing the report.
- 1) If the report is incomplete or one which is not current, a request shall be made to the driver or the competent medical specialist for the necessary information required to process the report.
- A) If the Department requests additional information from the driver, and the Department does not receive this information within 45 days after the written request, the Department shall cancel or medically deny the renewal of the person's driver's license pursuant to Sections 6-201 and 6-103 of the Illinois Vehicle Code.
- B) If the Department requests additional information from the competent medical specialist and the Department does not receive this information within 45 days after the written request, the driver shall be notified in writing that a current and complete medical report is needed. If the driver fails to comply within 45 days, the Department shall cancel or medically deny the driver's license pursuant to Sections 6-201 and 6-103 of the Illinois Vehicle Code.
- C) If a cancellation order is entered based upon an incomplete medical report or one which is not current and information is received to make the medical report favorable or preliminarily favorable, a rescind order shall be entered, provided an unfavorable medical report is not received in the interim.
- 2) If the report is questionable, the Department shall forward the medical report to the Board for determination as to the driver's ability to safely operate a motor vehicle as outlined in subsection (k) of this Section.
- k)j If the Department receives a report or statement from a competent medical specialist indicating the driver failed to abide by any of the terms of the medical agreement, the Department shall:
- 1) cancel or medically deny the driver if the medical report or medical statement does not contain a professional opinion that the driver can safely operate a motor vehicle, and forward the entire case to the Board for determination as to the driver's ability to safely operate a motor vehicle pursuant to subsection (k) of this Section.

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- 2) forward the entire case to the Board for determination as to the driver's ability to operate a motor vehicle pursuant to subsection (k) of this Section, if the medical report or medical statement contains a professional opinion that the driver can safely operate a motor vehicle.
- 3) cancel or medically deny a driver if the medical report or medical statement contains a professional opinion the driver cannot ~~can-not~~ safely operate a motor vehicle; the entire file shall be considered an unfavorable medical report as outlined in subsection (h) of this Section.
- 1)k The Department shall forward a driver's case to the Board when:
- 1) the driver was medically denied or canceled based upon the Board's last recommendation; or
 - 2) the Board has requested to review intermittent reports; or
 - 3) a different competent medical specialist submits a favorable medical report contradictory to an unfavorable medical report on file, which was used as the basis to deny or cancel driving privileges; or
 - 4) the Department receives a questionable medical report; or
 - 5) the Department receives notification the driver has failed to abide by any of the terms of his/her medical agreement; or
 - 6) the Department receives a request from a driver who wishes to have all medical reports on file with the Department reviewed by the Board; or
 - 7) the Department receives a request from a driver who wishes to appeal a Type B, C, D, E, F, G, J01, or any other medical restriction which has been added to his/her driver's license pursuant to Section 1030.92 of this Part.
- m When a case is referred to the Medical Advisory Board for review by the Department, the case shall be initially reviewed in the following manner:
- 1) The Chairperson or his/her designee shall assign the case to an individual Board member based upon his/her specialty or field of expertise in medicine. The Department shall serve as a correspondent for the collection and distribution of all medical reports and/or other information between the driver and the Board.
 - 2) Upon receipt of the case from the Department the individual Board member shall review the entire file and prepare an informal determination regarding the driver's ability to safely operate a motor vehicle to the Chairperson or his/her designee.
 - A) The Board member shall consider the driver's past driving record as evidenced by his/her driving abstract, medical reports, and any other medical information deemed to have probative value by the Board member regarding the driver's case.
 - B) The Board member shall consider any medications and/or rehabilitative devices currently being used or available to

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the driver.

C) The Board member shall use the medical criteria listed in Section 1030.18 of this Part when reviewing the driver's medical condition.

3) When reviewing a driver's case, the Board member may require the driver to submit him/herself to further medical examination(s) and to agree to make the results of these examinations available to the Board member for use in rendering an informal determination.

A) The driver shall be solely responsible for the selection, scheduling, and expenses related to any additional examination(s) which may be required of the driver.

B) While the Board member may designate the type of physician or medical specialist with whom the driver needs further examination, the Board member shall not recommend a particular physician or medical specialist.

C) The driver shall have up to 45 days from the date of the request to submit additional reports to the Department.

D) Any driver who refuses to submit to additional examination(s) as requested or refuses to make these reports available to the Board member shall be canceled or medically denied until he/she complies with the Board member's request and the Board member is able to render an informal determination to the Chairperson pursuant to Section 6-201 and 6-103 of the Illinois Vehicle Code.

4) The informal determination shall include the medical condition of the driver and the limitations associated with the condition which could reasonably impair a driver's ability to safely operate a motor vehicle; the scope of driving privilege, if any; and the reasons for the Board member's decision.

5) All stages of the informal determination process shall be made as soon as reasonably possible given the individual Board member's and Chairperson's caseload and the complexity of the case.

6) The name of the Board member rendering the informal determination shall not be disclosed to the driver under review.

n) Upon receipt of the informal determination from the Board member, the Chairperson or his/her designee shall make a formal determination an informal--recommendation to the Department regarding the driver's fitness to safely operate a motor vehicle and the scope of licensure, if any, including the use of mechanical devices and/or other conditions for driving.

1) The formal determination informal--recommendation by the Chairperson or his/her designee shall include the existence of the medical condition and/or limitation which may impair the driver's ability to safely operate a motor vehicle.

2) The formal determination informal--recommendation shall also be based upon the Findings of Fact and opinion of the individual Board member including, but not necessarily limited to, medical

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evaluations, reports submitted by medical specialists, medications taken by the driver, and his/her driving record, and other scientifically recognized information commonly accepted in the medical profession.

3) The formal determination informal--recommendation shall also indicate the scope of driving privileges which would enable the driver to safely operate a motor vehicle, including the extent, if any, to which compensatory aids and devices which must be used and the need of future controls.

4) In the event driving privileges are restricted or denied the formal determination recommendation shall also state the reasoning for such restriction or denial in accordance with the medical criteria stated in Section 1030.18 of this Part.

5) The Chairperson or his/her designee shall have the authority to confer with the Board member who rendered the determination in the event the Chairperson or his/her designee needs to confirm or clarify any portion of the Board member's informal determination Formal-Determination.

o) Upon receipt of the formal determination informal--recommendation the Department shall take the appropriate action depending upon the recommendation of the Chairperson or his/her designee on behalf of the Board.

1) If the Department receives a recommendation from the Board that in its professional opinion the driver is not medically fit to safely operate a motor vehicle, the Department shall enter an order canceling or medically denying the driver pursuant to Sections 6-201 and 6-103 of the Illinois Vehicle Code.

2) If the Department receives a recommendation from the Board that in its professional opinion the driver is medically fit to safely operate a motor vehicle, the Department shall rescind or terminate any medically related cancellation orders and allow the driver to make application for a new driver's license pursuant to Sections 1-110, 6-106, and 6-109 of the Illinois Vehicle Code [625 ILCS 5/1-110, 6-106, and 6-109].

A) The Department shall rescind the cancellation if the cancellation was for failure to comply with a request by either the Department or the Board.

B) The Department shall terminate the cancellation if the cancellation was based upon a previous unfavorable medical report, and the driver is otherwise in compliance with this Section.

p) If a driver desires to contest a restriction, cancellation, or denial of his/her driving privileges, the Department must receive a request from the driver for a formal review of his/her case within 30 days after the action taken by the Department. Formal review of the driver's case shall be made by a panel of 3 Board members selected by the Chairperson or his/her designee based upon the Board member's specialty or field of expertise. The Board member who rendered the

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formal determination shall participate in the formal review process. The following procedure shall apply to a case under formal review:

- 1) The Department shall notify the driver immediately and confirm the driver's request for Panel review within 7 working days after receipt of the same.
 - 2) The notice shall specifically state the driver has up to 45 days from the date of the notice to submit all additional medical reports to the Department for consideration by the Panel, if he/she so chooses.
 - 3) If the driver desires to furnish additional medical reports and/or statements he/she may do so by submitting all reports and statements together as one complete document for review by the Panel. The document must be delivered to the Department at the address as indicated on the confirmation notice.
 - 4) The Department shall at the direction of the Chairperson or his/her designee prepare and forward the entire case to the Review Panel upon receipt of the document from the driver, or a written statement from the driver indicating he/she does not wish to submit additional reports, or at the expiration of 45 days, whichever occurs first.
 - 5) Each member shall consider the contents of the file which was used to make the formal determination, including additional medical reports submitted by the driver on his/her behalf and new entries listed on the driver's driving record, if any. The Panel shall use the same medical criteria and procedure that apply when reviewing an individual case, including the ability to request additional medical examinations as found in subsection (m)(4) of this Section. The Review Panel shall only consider evidence which exists in written form. No oral testimony shall be allowed during this type of review.
 - 6) The formal determination under Panel review shall be made as soon as reasonably possible given the Board member and Chairperson's caseload, and the complexity of the case. Panel review cases shall be given priority over the review of individual cases.
 - 7) Upon completion of the Panel review, the informal determination of each Panel review member shall be forwarded to the Chairperson or his/her designee. The informal determination shall contain the same elements as outlined in subsection (m)(4) of this Section.
 - 8) Any restriction of driving privileges, cancellation, or medical denial shall remain in effect unless and until the Department notifies the driver to the contrary.
- g)P Upon receipt of each of the Review Panel's determinations, the Chairperson or his/her designee shall make a formal recommendation to the Department regarding the driver's ability to safely operate a motor vehicle and the scope of licensure, if any, including the use of mechanical devices and/or other conditions for driving.
- 1) The recommendation of the Chairperson or his/her designee shall

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be based upon the majority ruling of the review Panel member's informal determinations.

- 2) The Chairperson shall have the authority to confer with the members of the Review Panel in order to confirm, clarify, and formulate the recommendation to the Department.
 - 3) The Chairperson's recommendation shall contain the same elements as outlined in subsections (m)(1) through (4) of this Section.
- l)q The Department shall follow the recommendation of the Chairperson or his/her designee based upon the formal determination rendered by the Review Panel.
- 1) If the Department receives a formal recommendation from the Chairperson or his/her designee to uphold the decision of the individual Board member who first reviewed the case, the action taken by the Department shall remain in effect.
 - 2) If the Department receives a formal determination from the Chairperson or his/her designee to amend the original determination of the Board member who first reviewed the case, the Department shall follow the determination of the panel, including the recommendation of the granting of full or limited driving privileges or complete cancellation or denial of the driving privileges.
 - 3) The driver shall be notified immediately in writing by the Department of the Panel's formal determination along with any change to his/her driving privileges. The driver shall also be notified in writing of his/her right to request a medical hearing regarding the determination rendered by the Hearing Panel.
- s)t A driver who wants to contest the cancellation or medical denial of his/her driver's license or his/her privileges to obtain a driver's license for medical reasons shall be entitled to a hearing in accordance with 92 Ill. Adm. Code 1001-Subparts A and E, and Section 2-118 of the Illinois Vehicle Code [625 ILCS 5/2-118].
- t)u Unless a competent medical specialist has submitted a medical report indicating the physical or mental condition or disability no longer exists, the Department shall require the driver to submit a medical report at each driver's license renewal.
- 1) The Department shall notify the driver at least 30 days prior to the expiration of his/her driver's license. Such notification shall be in writing and mailed to the driver's last known address as indicated on the Department's driving record file.
 - 2) The notice shall state that the driver must submit a medical report when renewing his/her driver's license.
- u)t The Department shall require a driver to appear at a Driver Services facility to receive a corrected driver's license if a competent medical specialist or the Board recommends a driver's license restriction pursuant to Section 1030.92 of this Part.
- 1) The Department shall immediately provide written notification to the driver at his/her last known address as indicated on the Department's driving record file. The notice shall also state

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failure to comply within 20 days after the request will result in the cancellation of the person's driver's license pursuant to Section 6-201.5 of the Illinois Vehicle Code, provided a subsequent medical report is not received from the same competent medical specialist indicating the medical restriction is no longer necessary.

- 2) The Department shall mail a medical card to the driver describing the restriction(s) on his/her driver's license.
- 3) The driver must abide by the restriction(s) contained on the card.
- 4) The driver upon receipt of the medical card from the Department shall carry the medical card with his/her driver's license whenever the driver operates a motor vehicle.
- 5) If a driver is canceled for failing to comply with a request from the ~~this~~ Department pursuant to this subsection (u), and the driver subsequently complies with all requests of the Department, the cancellation shall be rescinded.

~~v)at~~ The Department shall require periodic medical reports between renewals if so recommended by a competent medical specialist or the Board.

(Source: Amended at 21 Ill. Reg. _____, effective _____)

Section 1030.18 Medical Criteria Affecting Driver Performance

The competent medical specialist and the Medical Advisory Board shall review the driver's case taking into consideration the driver's medical condition in determining the medical fitness of the driver to safely operate a motor vehicle. ~~Upon receipt of the driver's case from the Department, the Board shall review the case taking into consideration the driver's medical condition in determining the medical fitness of the driver to safely operate a motor vehicle.~~

- a) For purposes of this Section, the following definitions shall apply:

"Competent Medical Specialist" - a person licensed under the Medical Practice Act, or similar law of another jurisdiction, to practice medicine in all of its branches [225 ILCS 60].

"Department" - the Department of Driver Services of the Office of the Secretary of State.

"Driver" - any person who is currently licensed to operate a motor vehicle or any person applying for or renewing a driver's license.

"Functional Ability" - the degree of cognitive, mental, or emotional sensor motor, and sensory capability in performing

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activities of daily living, including safely performing driving tasks.

"Illinois Medical Advisory Board (Board)" - a panel consisting of at least 9 physicians appointed by the Secretary pursuant to Section 6-902 of the Driver's License Medical Review Law of 1992 [625 ILCS 5/6-902].

"Medical Denial" - an entry on a person's driving record by the Department indicating a driver may not renew his/her driver's license until the conditions set forth by the Department are met pursuant to this Section or Section 6-103 of the Illinois Vehicle Code [625 ILCS 5/6-103].

"Medical Report" - a confidential medical questionnaire designed by the Department and approved by the Illinois Medical Advisory Board, or a statement on letterhead made by a competent medical specialist containing the same information as the form designed by the Department. The medical report shall be directed to the Department and contain the date the competent medical specialist completed the report and the name, address, signature and professional license number of the competent medical specialist. The report must also contain the name, address, date of birth and driver's license number, if known, of the driver. A medical agreement upon execution by the driver shall be incorporated into and maintained on file with the driver's medical report.

"Mental Disorder or Disability" - a scientifically recognized condition which may medically impair a person's mental health to the extent he/she is unable to safely operate a motor vehicle.

"Physical Condition or Disability" - a scientifically recognized condition which may medically impair a person's physical health to the extent he/she is unable to safely operate a motor vehicle.

"Road Test" - an actual demonstration of the applicant's ability to operate a motor vehicle as required by Section 6-109 of the Illinois Driver Licensing Law of the Illinois Vehicle Code [625 ILCS 5/6-109].

"Self-Admission" - self-admission of the driver that he/she has a mental disorder/disability and/or physical condition or disability that may impair his/her ability to safely operate a motor vehicle.

"Vision Screening" - readings of an applicant's visual acuity and peripheral fields of vision obtained by a physician, ophthalmologist, optometrist or Department representative.

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b) The competent medical specialist and the Board shall apply the following medical criteria ~~needed to safely operate a motor vehicle where applicable~~, when rendering a medical opinion of a driver's ability to safely operate a motor vehicle to the Department.

1) The driver must possess the emotional and intellectual ability to operate a motor vehicle. Specifically, the driver's medical condition must be controlled as follows ~~driver must~~:

- A) be free from distractions of hallucinations;
- B) be free from impulsive behavior, homicidal tendencies, and/or suicidal tendencies;
- C) be oriented with advanced preparation of his/her destination;
- D) be able to recognize and understand symbols of language and road signs and possess the ability to not only see objects in his/her field of vision, but also to recognize their significance and to react to them with sufficient speed to avoid a catastrophe;
- E) possess sufficient memory facility to recall his/her destination, recall the significance of road signs and hazards, and recall the operational control of his/her motor vehicle; ~~be able to not only see objects in his/her field of vision, but also to recognize their significance and to react to them with sufficient speed to avoid a catastrophe;~~
- F) possess sufficient memory facility to ~~recall his/her destination, and recall the significance of road signs and hazards, and recall the operational control of his motor vehicle;~~

F) be able to distinguish left from right and to judge distance and relative speed of his/her motor vehicle as well as other vehicles which may present a potential danger.

2) The driver must possess the motor and sensory ability to safely operate a motor vehicle. Specifically, the driver's medical condition must be controlled as follows ~~driver must~~:

- A) possess the ability to sit in a stable and ~~steadily in an~~ erect posture and hold his/her head erect throughout the interval he/she intends to drive;
- B) be able to turn his/her head at least 25 degree in either direction in order to amplify the field of visions;
- C) be able to control the motor vehicle with ease, including the gripping of the steering wheel, reaching of the controls and pedals, all without unbalancing or stressing the driver;
- D) be able to perform all routine operations of the motor vehicle with steady, well coordinated movements ~~and without undue nervousness~~. The reaction time of the driver must be average and not limited by muscle, joint or skeletal deformity.

3) The driver must have the ability to sustain consciousness

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throughout the entire interval in which he/she intends to drive. The driver must be free from severe pain which could cause sudden incapacitation or the inability to control a motor vehicle.

5) The driver must be able to meet the vision requirements as found in Ill. Adm. Code 1030.70 and 1030.75.

6) The driver must not be medicated as to render him/herself incapable of ~~to perform other basic tasks necessary to safely~~ operating a motor vehicle.

c) The competent medical specialist and the Board shall evaluate the severity and/or limitations of the medical condition a driver may have on a case by case basis. The Board may at any time request additional information to assist them in evaluating the driver's case. The Board shall also take into account the driver's past driving history, including accidents, as well as all medication and/or mechanical mechanism being used by, or otherwise available to, the driver.

d) The competent medical specialist and the Board have ~~has~~ the authority ~~ability~~ to recommend full or limited driving privileges to the Department, including, but not limited to, restricted driving hours, or miles, use of mechanical devices, and other conditions which the competent medical specialist and the Board deem ~~deems~~ appropriate, such as requesting follow-up medical reports, depending upon the circumstances of the case.

e) The competent medical specialist and the Board have the authority to recommend medical denial of driving privileges indefinitely, or for a specific period of time.

f) Information to the extent known by the competent medical specialist to be considered by him/her in determining if an individual is medically fit to safely operate a motor vehicle, including but not limited to:

- 1) History of illness;
- 2) Severity of symptoms and prognosis;
- 3) Complications and/or co-morbid conditions;
- 4) Treatment and medications, effects and side effects, and person's knowledge and use of medications;
- 5) Results of medical tests and reports of laboratory findings;
- 6) Functional ability, including mental or emotional function; ~~tfi2~~
- 7) Reports of driver conditions or behavior;
- 8) Traffic accidents that have been caused by a medical condition. Temporary medical conditions (e.g., broken limbs) are not to be considered under this subsection (f).

g) The Department shall determine if an individual is qualified to safely operate a motor vehicle based on a vision test, the individual's knowledge of traffic laws, road signs and rules of the road, vehicle equipment and safe driving practices and a road test as outlined in Section 6-109 of the Illinois Vehicle Code [625 ILCS 5/6-109].

(Source: Amended at 21 Ill. Reg. _____, effective _____)

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1) Heading of the Part: Subacute Alcoholism and Substance Abuse Treatment Services

2) Code Citation: 77 Ill. Adm. Code 2090

3) Section Numbers: Adopted Action:
 2090.10 Amend section
 2090.20 Amend section
 2090.30 Amend section
 2090.35 Amend section
 2090.40 Amend section
 2090.50 Amend section
 2090.60 Amend section
 2090.70 Amend section
 2090.80 Amend section
 2090.90 Repeal section
 2090.100 Repeal section
 2090.105 Amend section
 2090.110 Amend section

4) Statutory Authority: The Alcoholism and Other Drug Dependency Act [20 ILCS 301].

5) Effective Date of Rule(s): January 27, 1997

6) Do these rulemakings contain an automatic repeal date? No

7) Do these rules contain incorporations by reference? No

8) Date Filed in Agency's Principal Office: January 24, 1997.

9) Notice(s) of Proposal Published in Illinois Register: November 8, 1996, Issue 45.

10) Has JCAR issued a Statement of Objections to these rules? No

11) Difference(s) between proposal and final version: In line 274, added "at 77 Ill. Adm. Code 2030.710" before the period.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes, as indicated in the agreement.

13) Will this rule replace an emergency rule currently in effect? Yes

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Rule(s): These amendments incorporate emergency

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amendments currently in effect and also merge all enrollment, certification and recertification sections into one section. Changes have also been made to correct any inconsistencies contained in this Rule as a result of the recent adoption (October 3, 1996) of the Department's new substance abuse treatment and intervention licensing rule, Part 2060.

16) Information and questions regarding these adopted amendments shall be directed to:

Norma J. Seibert
 Illinois Department of Alcoholism and Substance Abuse
 222 South College, 2nd Floor
 Springfield, IL 62704
 (217) 782-0685
 TDD: (217) 524-5103

The full text of the Adopted Amendments begins on the next page:

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NOTICE OF ADOPTED AMENDMENTS

TITLE 77: PUBLIC HEALTH

CHAPTER X: DEPARTMENT OF ALCOHOLISM AND SUBSTANCE ABUSE

SUBCHAPTER 9: MEDICAID PROGRAM STANDARDS

PART 2090

SUBACUTE ALCOHOLISM AND SUBSTANCE ABUSE TREATMENT SERVICES

Section	Purpose
2090.10	Definitions
2090.20	Medicaid Certification/Enrollment/Recertification
2090.30	General Requirements
2090.35	Reimbursable Services
2090.40	Quality Improvement Utilization-Review
2090.50	Client Records Recordkeeping
2090.60	Rate Setting
2090.70	Rate Appeals
2090.80	Inspections
2090.90	Providers
2090.100	Sanctions for Non-Compliance/Audits Recertification
2090.105	Inspections (Renumbered)
2090.110	Sanctions for Non-Compliance/Audits (Renumbered)

Application--and--Certification--Process--for--Medicaid

AUTHORITY: Implementing and authorized by Section 5-10 of the Alcoholism and Other Drug Abuse and Dependency Act [20 ILCS 301/5-10].

SOURCE: Adopted at 11 Ill. Reg. 2236, effective January 14, 1987; emergency amendments at 12 Ill. Reg. 11273, effective June 30, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 20061, effective November 26, 1988; emergency amendments at 15 Ill. Reg. 10222, effective June 25, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 16662, effective November 1, 1991; amended at 16 Ill. Reg. 11807, effective July 14, 1992; amended at 18 Ill. Reg. 14223, effective September 2, 1994; amended at 19 Ill. Reg. 9411, effective July 1, 1995; amended at 19 Ill. Reg. 10454, effective July 1, 1995; emergency amendment at 20 Ill. Reg. 12489, effective August 30, 1996, for a maximum of 150 days; amended at 21 Ill. Reg. 1600, effective January 27, 1997.

Section 2090.10 Purpose

- The requirements set forth in this Part establish criteria for participation by subacute alcoholism and other drug abuse treatment programs in the Illinois Medical Assistance Program (89 Ill. Adm. Code 148.340).
- The Department of Alcoholism and Substance Abuse (the Department), acting on behalf of the Department of Public Aid, shall certify the eligibility of applicants for participation who meet these requirements.

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- These requirements are in addition to licensure standards established in 77 Ill. Adm. Code 250, (Hospital Licensing Requirements) and 77 Ill. Adm. Code 2060 2058 (~~licensure~~ of Alcoholism and Substance Abuse Treatment and Intervention Licenses and Research Programs), and are for the purpose of assuring that Medicaid recipients shall receive quality services in accordance with 42 CFR 440 and 456.
- These requirements shall be used by the Department for certification, recertification, and periodic inspection of providers participating in the Medical Assistance Program.
- In addition to the duties of the Department above, the Department shall also allocate monies within its budget, which shall be for the purpose of reimbursement to certified providers for Medicaid eligible services, as described herein on behalf of the Illinois Department of Public Aid (IDPA). The Department shall, together with and by agreement with IDPA, provide for such reimbursement out of such funds.

(Source: Amended at 21 Ill. Reg. 1600, effective January 27, 1997)

Section 2090.20 Definitions

The following definitions shall apply to this Part:

"Adolescent": A person who is at least twelve years of age and under eighteen years of age ~~A--client--who--has--reached-his/her-twelfth birthday--but--has--not--yet--reached-his/her-eighteenth-birthday.~~

"Benefit Year": The State fiscal year.

"Client": Any person who is eligible to receive services under one of the following categories: Aged, Blind, and Disabled (AABD); Aid to Families with Dependent Children (AFDC); Medical Assistance, No Grant (MANG); Refugee Repatriate Program (RRP); Title XIX eligible Department of Children and Family Services (DCFS) wards; and persons under the age of eighteen who would qualify for AFDC but do not qualify as dependent children pursuant to 89 Ill. Adm. Code 140.7.

"Initial Supervision": ~~The review of client treatment and the use of other supervisory techniques for the purposes of assuring that a client's clinical needs are met.~~

"Department": The Illinois Department of Alcoholism and Substance Abuse.

"Drug-free treatment": Treatment service which does not include the use of methadone, Levo-alphaethylmethadol (LAAM) or other drugs used for substance abuse treatment.

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"Follow-up": A scheduled provider contact with a former client that occurs after the client has been discharged, has been previously specified in the client's treatment and continuing care discharge plan, and occurs for a period of time and at specified intervals. Follow-up is for the purpose of offering the discharged client continuing assistance as necessary to maintain and improve upon the clinical goals achieved during treatment.

"Individualized Treatment Plan": A written plan which identifies the care and treatment to be provided to the client based upon documented assessment of his/her problems and needs as well as strengths and resources.

"Physician": A person who is licensed to practice medicine in all its branches under the Medical Practice Act of 1987 [225 ILCS 60].

"Professional Staff": Any person who provides clinical services as defined in 77 Ill. Adm. Code 2060 and who meets the requirements for professional staff as specified in 77 Ill. Adm. Code 2060.309. Professional staff may also be a person determined to be appropriate to deliver the clinical services provided, in accordance with 77 Ill. Adm. Code 250, Subpart W.

"Provider": Any public or private agency, organization, or institution, or unit of State or local government or other legal entity licensed to deliver alcoholism or other drug abuse services according to the requirements specified in 77 Ill. Adm. Code 2060 2958 and enrolled to provide treatment services under the Illinois Medical Assistance Program.

"Psychiatrist": A person licensed to practice medicine in all its branches under the Medical Practice Act of 1987 [225 ILCS 60] and who meets the requirements of Section 1-121 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/1-121].

"Qualified Alcoholism and Other Drug Treatment Professional": A person who has a minimum of 2000 hours of paid formal work experience in the field of alcoholism/substance and/or other drug abuse treatment under clinical supervision including at least 1500 documented hours of direct client service and at least 40 hours of formal training in the field of alcoholism/substance and/or other drug abuse treatment, supervised and documented direct client service hours shall include the following alcoholism/substance and/or other drug abuse client services and treatment activities: screening, assessment and evaluation, treatment planning, intervention, referral activities, client education, case management and consultation, clinical recordkeeping, and recovery support. Direct treatment activities shall include: actively supervised experience working with

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individuals, groups, and families. A qualified alcoholism and other drug treatment professional may also be a physician licensed to practice medicine in all its branches pursuant to the Medical Practice Act of 1987, a person registered as a psychologist pursuant to the Clinical Psychology Practice Act (225 ILCS 15), a person licensed as a social worker or licensed clinical social worker pursuant to the Clinical Social Work and Social Work Practice Act (225 ILCS 20), a person holding a master's or higher level degree in counseling or a person certified by the Illinois Alcoholism and Other Drug Abuse Professional Certification Association (IABAPCA) as a "counselor," "reciprocal," "supervisor," or "master" in accordance with the Certified Alcohol and Other Drug Abuse Counselor Classifications Eligibility Standards for Certification, January 77-1992 (available from the IABAPCA at 1905 Wabash Avenue, Suite 77, Springfield, Illinois 62704). In the case of a licensee under the Hospital Licensing Requirements (77 Ill. Adm. Code 250), a qualified treatment professional may also be a person determined to be appropriate to deliver the clinical services provided in accordance with 77 Ill. Adm. Code 250, Subpart W.

"Qualified Alcoholism and Other Drug Treatment Supervisor": A person who, in addition to meeting the requirements for a qualified alcoholism and other drug treatment professional, has at least an additional 4,000 hours of paid work experience in the field of alcoholism/substance and/or other drug abuse treatment and has at least 10 hours of formal training in the philosophy and techniques of supervision.

"Recommended by a Physician": The physician formulation of approval of or involvement in each client's individualized treatment plan within 14 (calendar) days from the date of initial services. The physician shall establish or approve a diagnosis of alcoholism and/or other drug abuse for the services in order to be reimbursed as a Medicaid service under this Section. Evidence of the physician's supervision must be documented by the physician's handwritten signature and dated approval of the treatment plan or a signed notation indicating concurrence with the plan of treatment in the client's record. The program shall not use a signature stamp.

"Subacute": The level of care necessary to effectively treat an alcohol and/or other drug abuser's dependency on a chemical without the more intensive measures designed to treat primary medical conditions in an acute care setting (e.g., inpatient hospitalization). Subacute care may be delivered in a facility licensed under the rules for licensure of Alcoholism and Substance Abuse Treatment and Intervention Licenses and Research Programs (77 Ill. Adm. Code 2060 2958) or in a hospital, either of which is certified according to Section 2090.30 2990-99 for purposes of Medicaid reimbursed alcoholism

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and/or other drug abuse services.

"Treatment Plan": An individually written plan for a client which identifies the treatment goals and objectives based upon a clinical assessment of the client's individual problems, needs, strengths and weaknesses.

~~"Treatment--Protocol"--Written policies and procedures which describe the client services delivered by the program---These policies--and procedures must be approved and signed by a physician.~~

"Under the direction of a physician": Treatment services provided under the direct supervision of a physician who is on staff and continuously directs the provision of care.

(Source: Amended at 21 Ill. Reg. 1600, effective 1-1-81)

Section 2090.30 Medicaid Certification/Enrollment/Recertification

a) Providers may be certified and recertified by the Department as set forth herein and may enroll for participation in the Illinois Medical Assistance Program as provided in 89 Ill. Adm. Code 148.340(d). Application for Medicaid certification and enrollment for alcoholism and other drug abuse treatment service providers may be made by providers who are:

1) Currently licensed by the Department under the provisions of 77 Ill. Adm. Code 2060 for alcoholism and other drug abuse treatment services described in 77 Ill. Adm. Code 2060.

2) Currently licensed by the Illinois Department of Public Health as a hospital pursuant to 77 Ill. Adm. Code 250 for the treatment services described in 77 Ill. Adm. Code 250.

b) Medicaid Certification

1) Applications for certification may be obtained in person or by writing to:

Illinois Department of Alcoholism and Substance Abuse
160 N. LaSalle, Suite N700

Chicago, Illinois 60601

Attention: Division of Licensing and Monitoring

(312) 814-4718

(312) 419-8432 TDD

or

Illinois Department of Alcoholism and Substance Abuse

222 S. College, 2nd Floor

Springfield, Illinois 62704

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Attention: Division of Licensing and Monitoring

(217) 782-0685

(217) 524-5103 TDD

2) Applicants for new certification will be accepted from programs or parent organizations of such programs which have been licensed as specified in this Section for at least two years. Applicants shall demonstrate two years of experience in providing quality substance abuse services of the kind for which certification is being requested and for the type of population which will be served.

3) Applicants shall submit documentation of the following:

- A) evidence of the need within the community for the type of services to be provided by the program for which certification is sought;
- B) description of the organization that will be operating the program;
- C) fiscal solvency of the organization;
- D) description of the physical facilities to be utilized by the program;
- E) description of the program and the clientele it serves;
- F) projection of the total number of Medicaid clients to be served each month, the average length of stay anticipated, and the estimated average per person cost of treatment;
- G) schedule of the specific dates, times and places services will be provided;
- H) number and type of people served during the previous two years in the program for which certification is sought and a description of the people served (demographics, gender, drug of choice, Medicaid eligibility, income level, etc.);
- I) name, address and professional qualifications of the program's Medical Director;
- J) name and qualifications of each individual who will be staffing the program and a description of that individual's responsibilities with respect to the program;
- K) copies of written referral agreements with other social service systems and primary medical care service systems within the applicant's area;
- L) copies of linkage agreements with other substance abuse treatment programs within the applicant's area implemented to assure availability of all levels of care as required in 77 Ill. Adm. Code 2060;
- M) documentation of the program's quality assurance system and utilization review policy as applied to the program's clinical standards which have been used for the previous two years, with a copy of the two most recent utilization review reports; and
- N) measurable outcome evaluation process used for the past two

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- years and statistics on the program's client outcomes.
- 4) Applicants who receive funding from the Department shall submit evidence that they are in compliance with 77 Ill. Adm. Code 2030.710 and 2030.740. Applicants who do not receive funding from the Department shall submit copies of the two previous years' annual audits according to the standards established in 77 Ill. Adm. Code 2030.620 and two copies of the statistical and financial data submitted in a format required by the Department in 77 Ill. Adm. Code 2030.710.
- 5) Applications which are missing significant components or which have inadequate information shall be returned to the applicant with a statement specifying the missing or inadequate information. Completed applications may be resubmitted. Applications which are missing less significant components may be held by the Department and the applicant notified in writing of the missing information. The applicant may submit only the missing components. The Department shall hold such incomplete applications no more than 30 calendar days.
- 6) Certification is site-specific and services are to be provided on-site, unless they are provided in accordance with the off-site service provisions as set forth in 77 Ill. Adm. Code 2060.203.
- 7) Sites providing 24 hours of services to clients and having more than 16 beds shall not be certified for Medicaid enrollment for other than residential rehabilitation services.
- 8) In order to receive certification for a site having 16 beds or less, a program must meet the following criteria:
- A) be a free-standing program of 16 or fewer beds; or
 - B) be within a larger facility, as a distinct unit of 16 beds or less, which:
 - i) is licensed;
 - ii) is physically separate from other certified and licensed programs (for example, separated by floors, wings, or other building sections);
 - iii) provides a level of care significantly different in clinical content from other certified and licensed programs (for example, adult versus adolescent care, women versus men, hearing impaired versus non-impaired);
 - iv) has a separate cost center (budgeting, accounting, etc.);
 - v) has separate staffing; and
 - vi) has separate operating policies and procedures.
- 9) Prior to certification, the Department shall conduct an on-site inspection.
- 10) Based upon the on-site inspection and a review of the application for certification, the Department will certify the program if the Department determines that:
- A) the applicant has proven that an unmet need for the services

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- exists in the community the program will serve;
- B) the organization operating the program is fiscally sound and responsible;
 - C) the program management is experienced in business and in the delivery of substance abuse services;
 - D) the program has sufficient written agreements with social, medical and other substance abuse service providers within its area to assure proper linkage of services to an individual;
 - E) the program has experience with the Medicaid eligible population it intends to serve;
 - F) the program has adequate physical facilities and adequate numbers of professional staff to provide the services;
 - G) the program conducts utilization review and has a quality improvement plan; and
 - H) the program has a measurable outcome evaluation process in place that provides measurable indicators of improvement by program participants.
- 11) The Department shall notify the applicant in writing of its determination regarding certification.
- A) Approval of Certification/Medicaid Enrollment

If the Department certifies the program, it shall include the Department of Public Aid's (IDPA) Medicaid enrollment forms with the letter of certification. The applicant shall submit the completed enrollment forms along with a copy of the letter of certification to IDPA. However, providers who have applied for hospital licensure for the first time and hold a provisional hospital license for treatment services are not eligible to apply for Medicaid enrollment for those treatment services.
 - B) Denial of Certification

If the Department is not able to certify the program based on the criteria outlined in this Section, the Department shall notify the applicant in writing, describing those deficiencies that will result in a denial of the certification. The applicant has 60 days after receipt of the notice to correct the deficiencies and supply the new information to the Department. If the new information indicates that the program meets the criteria of this Part, the Department shall certify the applicant. If the program continues to fail to meet the requirements of this Part, the Department shall deny the application for certification. If certification is denied, the applicant may appeal the Department's decision and request a hearing pursuant to 77 Ill. Adm. Code 2000 (Rules of Practice and Procedure in Administrative Hearings).
- 12) Certification shall be effective on the date of approval by the Department and shall remain in effect until the expiration of the

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provider's license as required in this Section or for three years for any provider not licensed by the Department. Certification is also subject to any sanctions levied under Section 2090.100 of this Part. After the effective date of certification, the provider may deliver services to Medicaid recipients that will be reimbursable after the applicant completes the IDPA Medicaid enrollment procedure.

- 13) When and if a certified provider is no longer licensed as set forth in this Section (whether voluntarily or involuntarily) the certification shall be null and void. Upon proof by the Department's licensing division that the license is no longer in effect, the Department shall notify the provider by certified mail that certification is null and void.

14) Recertification

- A) To be eligible for recertification, providers shall be in compliance with all Sections of 77 Ill. Adm. Code 2060 referenced in this Part.

- B) To be eligible for recertification, providers who receive funding from the Department shall be in compliance with 77 Ill. Adm. Code 2030, Subparts D and G and Sections 2030.710 and 2030.740. Providers who do not receive funding from the Department shall submit one copy of all annual audits during the previous certification period, according to the standards established in 77 Ill. Adm. Code 2030.620 (Audit Requirements), and two copies of statistical and financial data submitted on forms required by the Department.

- C) Providers shall apply for recertification at least 90 days prior to the expiration of the provider license.

- D) Providers shall submit a recertification application provided by the Department. In addition, the provider shall submit copies of all utilization review (UR) reports and results of the program's measured outcome evaluations since the date of last inspection.

- E) The Department shall review all documents and the results of the last licensure inspection and shall recertify the program if it complies with the requirements of the Alcoholism and Other Drug Abuse and Dependency Act and this Part.

15) Denial of Recertification

If the Department is not able to recertify the program based on its review and inspection, the Department shall notify the applicant in writing, describing those deficiencies that will result in a denial of the recertification. The applicant has 30 days after receipt of the notice to correct the deficiencies and supply the new information to the Department. If the new information indicates that the program meets the criteria of this Part, the Department shall recertify the program. If the program continues to fail to meet the requirements of this Part, the

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Department shall deny the application for recertification and shall notify the applicant in writing, giving the reasons for the denial. The provider may appeal the Department's decision and request a hearing pursuant to 77 Ill. Adm. Code 2000 (Rules of Practice and Procedure in Administrative Hearings). Certification shall remain in effect pending the Department's final decision on recertification unless the provider is sanctioned pursuant to Section 2090.100 of this Part. When the denial of recertification is final, the provider shall arrange for transfer of all Medicaid clients of the program as appropriate.

- a) Application for Medicaid enrollment for alcoholism and other drug abuse treatment service providers may be made by providers who are currently licensed by the Department under the provisions of 77 Ill. Adm. Code 2058 for alcoholism and other drug abuse treatment services described in 77 Ill. Adm. Code 2058.

- b) Currently licensed by the Illinois Department of Public Health as a hospital pursuant to 77 Ill. Adm. Code 250 for the treatment services described in 77 Ill. Adm. Code 250.

- c) Providers who have applied for hospital licensure for the first time and hold a provisional license for treatment services are not eligible to apply for Medicaid enrollment for those treatment services.

- d) Providers shall be certified by the Department as set forth herein and enroll for participation in the Illinois Medical Assistance Program as provided in 89 Ill. Adm. Code 148.348(d).

- e) Certification is site specific and services are to be provided on-site unless there is documentation of need for off-site service as set forth in Section 2090.40(a)(1) and (5). Sites providing 24-hours of services to clients and having more than 16 beds shall not be certified for Medicaid enrollment for other than residential rehabilitation services.

(Source: Amended at 21 Ill. Reg. 1600, effective JAN 27 1991)

Section 2090.35 General Requirements

- a) To be reimbursable, treatment services shall be provided in compliance with all provisions specified in 77 Ill. Adm. Code 2060. Specifically, physician and professional staff involvement in treatment services shall be in compliance with 77 Ill. Adm. Code 2060.417, 2060.419, 2060.421, 2060.423 and 2060.425. A physician must review and approve the eligible client's diagnosis and treatment plan within fourteen days after initial service. Medical involvement and treatment plan development and review shall be consistent with 77 Ill. Adm. Code 2050.331 (Medical Responsibility) and 2050.333 (Treatment Plans) and 2050.336 (Progress Notes). A qualified treatment professional shall develop and review treatment plans according to the

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following-review-times:

- 1) upon admission, transfer, and discharge
- 2) upon a change in the level of client functioning such as, but not limited to, when treatment plan objectives are met or new problems or needs are identified
- 3) at times specified for review in the individualized treatment plan
- 4) at the end of the estimated length of treatment and thereafter on the revised estimate of additional length of treatment, or every ninety days, whichever comes first.
- 5) The provider shall submit Medicaid claims on a timely basis. Claims shall be submitted as soon after the service date as is reasonable unless there is good cause for later submission. In any event, if a clean claim for a service provided within a State fiscal year fiscal year is not submitted to the State on a timely enough basis to be paid within the State Fiscal Year lapse period, the provider must pursue reimbursement through the Court of Claims. Claims submitted later than 12 months from the date of service shall not be reimbursed by the State. The provider shall only bill for services which are reimbursable.

c) Information Collection Through DARTS-

- 1) The provider shall report, on a monthly basis, demographic and service system data using the Department's BASA's Automated Reporting and Tracking System (DARTS). The data collected shall be for the purpose of assessing individual client performance and for planning for future service development. Information to be reported by the provider, for each individual served by a program certified under Section 2090.90 of this Part, shall include but is not limited to the following:
 - A) Name, date of birth, gender, race and national origin, family size, income level, marital status, residential address, employment, education and referral source.
 - B) Special population designation, such as Medicaid eligible clients, women with dependent children, intravenous drug users (IVDUs), DCFS clients, DMHDD clients, and criminal justice clients.
 - C) Drug/alcohol problem areas treated, characterized by drugs of use, frequency of use, and medical diagnosis.
 - D) Closing date information, such as the reason for discharging the client from the program.
- 2) The Department shall supply providers with DARTS software.
- 3) Disclosure of information contained within DARTS is governed by the specific provisions of federal regulations under Confidentiality of Alcohol and Drug Abuse Patient Records (42 CFR 2 (1987)).

- d) The reimbursement limits herein shall not be applied in situations where to do so would deny an eligible individual under age 21 from receiving early and periodic screening, diagnostic and treatment

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services" (EPPSDT) as defined in 42 USC 1396d(r). Services as set forth in this Part shall be reimbursable to an eligible individual under age 21 for as long as the services are clinically necessary pursuant to review which is consistent with subsection (a) of this Section.

- e) The reimbursement limits herein shall not be applied where to do so would deny services to a pregnant woman that have been determined to be clinically necessary pursuant to review which is consistent with subsection (a). This exemption from the limits exists during the pregnancy and through the end of the month in which the 60-day period following termination of the pregnancy ends (post partum period), or until the services are no longer clinically necessary, whichever comes first. This exemption shall not apply to a woman who enters treatment services after delivery.

(Source: Amended at 21 Ill. Reg. 160, effective 1/1/87)

Section 2090.40 Reimbursable Services

a) Level I: (formerly Outpatient Services)

1) Definition

The provision of treatment services as defined in 77 Ill. Adm. Code 2060.401(b), face-to-face diagnostic and individual group or family drug-free treatment services to a client who, in the clinical judgment of a qualified alcoholism and other drug treatment professional, is experiencing a problem with alcohol or other drugs, is a family, social, financial, employment, educational, and/or legal problem. Services are delivered in a Medicaid-enrolled non-residential subacute setting. However, outpatient services may be provided at a client's place of residence or other off-site location when required because of illness, disability, infirmity, or problems of accessing care at a certified program site, as documented in the client's individualized treatment plan. This service is designed to reduce or eliminate a client's intake of alcohol and/or other drugs.

2) Scope

Outpatient treatment services must be delivered in accordance with a client's individualized treatment plan recommended by a physician. Services shall include but are not limited to assessment, diagnosis and subsequent individual group or family counseling, case coordination, aftercare, and follow-up.

3) Admission Criteria

In the clinical judgment of a qualified treatment professional, clients admitted to an outpatient treatment program must be experiencing problems related to their addictive or abusive use of alcohol and other drugs. Clients admitted must not be actively

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experiencing--psychotic--manifestations--or--other--severe--mental--or--physical--illness--which--require--immediate--acute--medical--or--psychiatric--care--in--addition--clients--must--not--be--intoxicated--or--incapacitated--or--in--withdrawal--due--to--the--effects--of--alcohol--or--other--substances--A--client's--physical--and--emotional--condition--must--allow--him/her--to--function--in--his/her--usual--non--residential--setting--

4) Staffing-Qualifications

A) Outpatient--services--must--be--delivered--by--qualified--alcoholism--and--other--drug--treatment--professionals--as--defined--by--this--Part--

B) Each--qualified--alcoholism--and--other--drug--treatment--professional--providing--treatment--services--must--receive--a--minimum--of--four--hours--per--month--of--direct--clinical--supervision--delivered--in--no--fewer--than--2--sessions--by--a--qualified--alcoholism--and--other--drug--treatment--supervisor--

2)5) Reimbursement

Level I drug-free Outpatient treatment services delivered to clients are Medicaid-reimbursable via the prospective rates in effect as of the date of service (89 Ill. Adm. Code 148.370). Medicaid claims are submitted to the Department and shall meet the requirements of IDPA rules pursuant to 89 Ill. Adm. Code 148.340-148.370 for alcoholism and substance abuse treatment programs (89 Ill. Adm. Code 148.340 through 148.370). The

billable outpatient unit of service is a client hour defined as face-to-face counseling with a diagnosed client in an individual, group, or family setting. Reimbursement shall occur by a fee-for-service mechanism, using one client hour as the base unit of service, billable to the nearest quarter-hour. No more than two client hours shall be reimbursed for any client during a 24-hour period, except that the maximum number of hours may be extended by the program to three during a 24-hour period on an individual basis when circumstances exist which limit accessibility to treatment services. These circumstances shall be as significant travel distances must be documented in the client's individualized treatment plan in instances where the program has extended the client hours beyond two per 24-hour period, no more than two of those client hours may be reimbursed for group treatment. No more than 48 hours may be reimbursed for an eligible adolescent client per benefit year, and no NO more than 25 hours may be reimbursed for an eligible adult client per benefit year.

b) Level II: (formerly Intensive Outpatient Services)

1) Definition

The provision of treatment services as defined in 77 Ill. Adm. Code 2060.401(c). diagnostic--services--and--individual--or--group--drug--free--treatment--services--on--an--outpatient--basis--in--a--Medicaid--enrolled--subacute--setting--This--service--is--designed--to--reduce--or--

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eliminate--a--client's--intake--of--alcohol--and/or--other--substances--

2) Scope

Intensive--outpatient--treatment--services--must--be--delivered--in--accordance--with--a--client's--individualized--treatment--plan--recommended--by--a--physician--Services--shall--include--but--are--not--limited--to--assessment--evaluation--diagnosis--and--subsequent--individualized--group--or--family--counseling--education--case--coordination--aftercare--and--follow-up--Intensive--outpatient--treatment--is--a--structured--program--offered--a--minimum--of--two--days--or--evenings--per--week--not--to--exceed--4--hours--per--24--hour--period--with--a--range--of--at--least--6--hours--but--not--to--exceed--20--hours--of--treatment--by--a--qualified--alcoholism--and--other--drug--treatment--professional--per--client--per--week--

3) Admission-Criteria

In--the--clinical--judgment--of--a--qualified--treatment--professional--clients--admitted--to--an--intensive--outpatient--treatment--program--must--be--experiencing--problems--related--to--their--addictive--or--abusive--use--of--alcohol--and/or--other--drugs--which--require--a--level--of--care--exceeding--that--available--in--outpatient--treatment--Clients--experiencing--active--psychotic--manifestations--or--other--severe--mental--or--physical--illness--which--requires--immediate--acute--medical--or--psychiatric--care--should--not--be--admitted--to--intensive--outpatient--treatment--in--addition--the--client--shall--not--be--intoxicated--incapacitated--or--in--withdrawal--due--to--the--effects--of--alcohol--or--other--drugs--

4) Staffing-Qualifications

At--least--one--qualified--alcoholism--and--other--drug--treatment--professional--must--deliver--at--least--50%--of--direct--client--treatment--services--during--each--treatment--session--Additional--services--may--be--delivered--by--specialty--staff--such--as--vocational--counselors--or--activity--therapists--

2)5) Reimbursement

Level II drug-free Intensive--outpatient treatment services delivered to clients are Medicaid reimbursable via the prospective rates in effect as of the date of service (89 Ill. Adm. Code 148.370). Medicaid claims are submitted to the Department, and shall meet the requirements of IDPA rules or alcoholism and substance abuse programs (89 Ill. Adm. Code 148.340 through 148.370). Reimbursement shall occur by a fee-for-service mechanism, using one client session of a minimum of three hours as the base unit of service. No more than one client session shall be reimbursed per 24-hour period. Services for clients enrolled in Level II (intensive outpatient) treatment shall not be reimbursed under the provisions for Level I (outpatient) services. No more than 75 hours shall be reimbursed for an eligible adult client per benefit year.

c) Level III: (formerly Inpatient/ Adolescent Residential Rehabilitation Services)

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1) Definition-Adolescent Residential Rehabilitation
The provision of treatment services as defined in 77 Ill. Adm. Code 2060.401(d). ~~diagnostic--services--and--individual--or--group~~
Such treatment shall be drug-free treatment--services for adolescents on a scheduled-only residential basis in a Medicaid enrolled hospital subacute setting, or to adolescents in a psychiatric facility or an inpatient program in a psychiatric facility, either of which is accredited by the Joint Commission on Accreditation of Health Care Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181. This service is designed to reduce or eliminate an adolescent's intake of alcohol and/or other drugs.

2) Scope
Adolescent residential rehabilitation must be delivered in accordance with an adolescent's individualized treatment plan recommended by a physician if in a hospital setting, and under the direction of a physician if in a psychiatric facility. Services--must--include--but--are--not--limited--to--assessment; evaluation;--diagnosis;--and--subsequent--individual;--group;--or family--counseling;--education;--case--coordination;--aftercare--and follow-up;--Adolescent--residential--rehabilitation--is--a--structured residential--treatment--program--offered--seven--days--per--week--and includes--a--minimum--of--25--hours--of--treatment--per--client--per--week.

3) Admission-Criteria
In--the--clinical--judgment--of--a--qualified--treatment--professional, adolescents--admitted--to--a--residential--rehabilitation--treatment program--must--be--experiencing--problems--related--to--their--addictive or--abusive--use--of--alcohol--and/or--other--drugs--which--require--a level--of--care--exceeding--that--available--in--outpatient--and intensive--outpatient--treatment;--Adolescents--experiencing--active psychotic--manifestations--or--other--severe--mental--or--physical illness--which--requires--immediate--acute--medical--or--psychiatric care;--should--not--be--admitted--to--adolescent--residential rehabilitation;--in--addition;--the--adolescent--shall--not--be intoxicated;--incapacitated--or--in--withdrawal--due--to--the--effects--of alcohol--or--other--drugs.

4) Staffing-Qualification
At--least--one--qualified--alcoholism--and--other--drug--treatment professional--must--deliver--at--least--50%--of--direct--client--treatment services--during--each--treatment--session;--Additional--services--may be--delivered--by--specialty--staff;--such--as--vocational--counselors--or activity--therapists.

2)5) Reimbursement
Adolescent residential rehabilitation treatment services delivered provided to clients are Medicaid reimbursable via the prospective rates in effect as of the date of service (89 Ill. Adm. Code 148.370). Medicaid claims are submitted to the Department and shall meet the requirements of IDPA rules for

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alcoholism and substance abuse treatment programs (89 Ill. Adm. Code 148.340 through 148.370). Reimbursement shall occur on a per diem basis. Services in an adolescent residential rehabilitation program with over 16 beds shall not be reimbursed under the provisions for Level I (outpatient) or Level II (intensive outpatient) services. No--more--than--48--days--shall--be reimbursed--in--each--benefit--year--for--an--eligible--client--for adolescent--residential--rehabilitation--alone--or--in--combination with--day--treatment.

d) Day-Treatment-Services
3)1) Definition-Day Treatment
The provision of treatment services as defined in 77 Ill. Adm. Code 2060.401(d). Drug-free diagnostic--services--and--individual or--group--drug--free treatment services on a scheduled-only residential basis by a program licensed pursuant to 77 Ill. Adm. Code 2060.2058-372-376 and certified hereunder as having 16 beds or less fewer as specified in Section 2090.30 of this Part and excluding room and board, meals, night supervision of dormitory areas and other domiciliary support services. Treatment services may be provided to adults and adolescents. No--be--certified--as having--16--beds--or--less;--a--program--must--meet--the--following criteria:
A) be--a--free-standing--program--of--16--or--fewer--beds;--or
B) be--within--a--larger--facility;--as--a--distinct--unit--of--16--beds or--less--which:
i) is--separately--certified--and--licensed;
ii) is--physically--separate--from--other--certified--and--licensed programs--(for--example;--separated--by--floor; wings;--or--other--building--section);
iii) provides--a--level--of--care--significantly--different--in clinical--content--from--other--certified--and--licensed programs--(for--example;--adult--versus--adolescent--care; women--versus--men;--hearing--impaired--versus non-impaired; etc.);
iv) has--a--separate--cost--center--(budgeting--accounting; etc.);
v) has--separate--staffing;--and
vi) has--separate--operating--policies--and--procedures.

2) Scope
The--scope--of--services--is--the--same--as--set--forth--in--subsection (c)(2)--excluding--room--and--board;--meals;--night--supervision--of dormitory--areas--and--other--domiciliary--support--services.

3) Admission-Criteria
Admission--criteria--shall--be--the--same--as--those--set--forth--in subsection--(b)(3)--above.

4) Reimbursement
Day treatment services shall be reimbursed at an all-inclusive per diem rate as set forth in Section 2090.70(c)(4), available

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upon certification of the facility and approval of the Illinois Public Aid State Plan provisions for day treatment by the Federal Health-Care Financing Authority (HCFA). No more than 30 days shall be reimbursed for an eligible adult client and no more than 40 days shall be reimbursed for an eligible adolescent client per consecutive 365-day period starting with the first day of a billable service for day treatment alone or in combination with adolescent residential rehabilitation.

d) Ancillary Psychiatric Diagnostic Services

- 1) Ancillary psychiatric diagnostic services are limited psychiatric evaluations to determine whether the client's primary condition is attributable to the effects of alcohol or drugs or to a diagnosed psychiatric or psychological disorder. Such an evaluation shall determine the client's primary condition and recommend appropriate treatment services.
- 2) Reimbursable psychiatric evaluations are limited to a psychiatric evaluation/examination of a client and the exchange of information with the primary physician and other informants such as nurses, counseling staff, or family members and the preparation of a report including psychiatric history, mental status, and diagnosis. This service shall be performed by a psychiatrist.
- 3) Reimbursable psychiatric evaluations may be delivered to clients admitted to Levels I, II and III care outpatient, intensive outpatient, (adolescent residential rehabilitation, intensive or day treatment) where the need for such services is documented in the client's individualized treatment plan. Documentation of all such services shall be maintained in the client record.
- 4) Ancillary diagnostic services delivered to clients are Medicaid-reimbursable on a per-encounter basis at the practitioner's usual and customary charge, not to exceed the prevailing rate as established by IDPA pursuant to 89 Ill. Adm. Code 140.400.

(Source: Amended at 21 Ill. Reg. 1600, effective JAN 27 1997)

Section 2090.50 Quality Improvement Utilization-Review

Each provider shall have and adhere to a quality improvement plan developed in compliance with the provisions in 77 Ill. Adm. Code 2060.315.

- a) Each provider shall have written utilization review (UR) policies and procedures for the ongoing study of client care and treatment patterns. Providers licensed by the Department shall have procedures in compliance with the quality assurance system set forth in 77 Ill. Adm. Code 2060.309, incorporated herein by reference. Providers licensed by the Illinois Department of Public Health shall comply with standards for quality assessment and for utilization review as set

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forth by the Joint Commission on Accreditation of Health-Care Organizations in its "Accreditation Manual for Hospitals," 1992. Such policies and procedures are for the purpose of determining the clinical appropriateness of client admission lengths of stay, supportive services, and shall lead to reports every six months containing specific plans for corrective action and follow through as required.

- b) UR policies shall specifically establish criteria and norms for the clinical appropriateness of admission and re-admission length of stay and discharge and aftercare planning for individuals not admitted for treatment. Policies shall establish criteria for referral to other appropriate services. Procedures shall set forth the process by which the provider assesses whether provider practice conforms to the established criteria and norms, identifies problems and plans and follows through with corrective action.

- c) Readmission criteria shall be established and a process developed which shall include a review of all admission activities and a specific examination of prior treatment experiences. Providers shall document the precipitating problem(s) and the need for readmission and shall specify appropriate services for each readmitted client.

- d) Discharge Criteria

- 1) Discharge criteria shall be developed for the purpose of Medicaid billing which clearly state the conditions under which treatment is terminated, e.g., upon completion of the recipient's treatment plan or a client leaving against staff advice.

- 2) Discharge and aftercare planning is to be initiated as soon as the initial treatment plan is developed.

- e) The UR process shall select a systematic sample which includes at least fifteen percent of all Medicaid recipients admitted and/or discharged since the last review. The review shall include the adequacy and completeness of client records, the course of treatment in comparison with established norms and criteria, particularly for appropriateness of admission length of stay, discharge planning, diagnosis, and compliance with Section 2090.40 (a)(1)-(4) (b)(1)-(4) and or (d)(2) as appropriate based upon the service delivered.

- f) Records shall be maintained of corrective actions taken by the executive director and/or the governing board pursuant to the 6-month evaluated annual and revised as necessary.

- g) Records of individual case reviews, 6-month reports and records of corrective action shall be made available for inspection by the Department.

(Source: Amended at 21 Ill. Reg. 1600, effective

JAN 27 1997)

Section 2090.60 Client Records Recordkeeping

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Each provider shall maintain client records in compliance with the provisions in 77 Ill. Adm. Code 2060.325.

- a) Each provider shall maintain client records which include:
 - 1) An individual treatment plan including treatment goals or in the case of detoxification, screening and assessment results which include documented problem assessment and a diagnosis of alcoholism or alcohol abuse and/or other drug abuse.
 - 2) Provided and movement toward established goals.
 - 3) Documentation which includes the date and time of duration and staff member involved for each service.
 - 4) Medical assessment and documentation as required by 77 Ill. Adm. Code 2050.321(f) and 2050.321(f) documentation of current medication usage and documentation of all ancillary medical services.
 - 5) Discharge and aftercare plans.
 - 6) All records of services delivered to Medicaid recipients shall remain on the provider's premises and shall be retained for at least five years.
 - 7) All records shall be made available for inspection by the Department.

(Source: Amended at 21 Ill. Reg. 1600, effective JAN 24 1997)

Section 2090.70 Rate Setting

- a) The amount approved for payment for alcoholism and other drug abuse treatment is based on the category and amount of services required by and actually delivered to a client. The amount is determined in accordance with prospective rates developed by the Department and adopted by the Department of Public Aid. The adopted rate shall not exceed the charges to the general public.
- b) Rates are cost-based and are established annually for each service. Costs will be determined based upon the information submitted by the provider in accordance with 2090.90(c).
- c) Rates are generated through the application of formal methodologies specific to each reimbursable service as specified in Section 2090.40 of this Part category.

- 1) Outpatient services shall be reimbursed at an all-inclusive per client hour rate payable to the nearest quarter hour. Such services are defined as face-to-face counseling with a diagnosed client.
- 2) Intensive outpatient services shall be reimbursed at an all-inclusive rate, for a minimum of three hours per 24-hour period.
- 3) Adolescent residential rehabilitation services shall be reimbursed at an all-inclusive per diem rate.
- 4) Day treatment services shall be reimbursed at an all-inclusive

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- per diem rate exclusive of costs attributable to domiciliary services as specified in Section 2090.40(f)(2).
- 5) Ancillary psychiatric diagnostic services shall be reimbursed on a per encounter basis to psychiatrists at the practitioner's usual and customary charge not to exceed the prevailing rate as prevailing rate as established by IDPA 89-111, Adm. Code 140.400.

- d) 6) The provider shall not be reimbursed for more than one Medicaid covered subacute alcoholism or other drug abuse service per client per day except for ancillary services which may be reimbursed in addition to one of the other Medicaid covered services.

- e) 7) Level I (outpatient) Outpatient and Level II (intensive outpatient) services, which may be delivered in a group setting, shall be reimbursed only for up to 12 clients supported by Department BASA funding (Medicaid or other).

f) d) Hospitals

The Department shall establish rates with hospitals delivering subacute services who are certified pursuant to this Part. Rates shall be based on upon the reimbursable services definitions found in Section 2090.40(f)(1)-(f)(4) and (f)(5) of this Part, and shall be subject to the provisions of subsections (f)(1)-(f)(4) and (f)(5) of this Section.

(Source: Amended, 1997, 21 Ill. Reg. 1600, effective JAN 24 1997)

Section 2090.80 Rate Appeals

- a) providers may appeal their rates in writing within 30 calendar days of the postmark date of the rate notice.
- b) Appeals shall be submitted to the Department Department's Office of Purchased Rate Development at the address contained in Section 2090.70 (b).
- c) The Department shall determine whether a reason for the appeal exists pursuant to subsection Section 2090.80 (d) of this Section and that the written appeal contains all elements required in subsection Section 2090.80 (e) of this Section. Further clarification of the information submitted may be requested of the provider. The Department shall forward a recommendation to IDPA within 60 calendar days of receipt of the appeal. IDPA shall make the final administrative decision based upon the appeal's conformity with this Part.
- d) Rate appeals may be considered for the following reasons:
 - 1) Mechanical or clerical errors committed by the provider in reporting historical expenses used in the calculation of allowable costs.
 - 2) Mechanical or clerical errors committed by the Department in auditing historical expenses as reported and/or in calculating

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- reimbursement rates.
- 3) The Department and the provider have entered into a written agreement to amend, alter, or modify substantive programmatic or management procedures attendant to the delivery of services, which have a substantial impact upon the costs of service delivery.
 - 4) The alcoholism or other drug abuse licensing authority has amended the licensed capacity of a facility or treatment service.
 - 5) The alcoholism or other drug abuse licensing authority requires substantial treatment service changes as a result of mandated licensure requirements.
 - 6) The alcoholism or other drug abuse licensing authority requires substantial changes in physical plant as a result of mandated licensure requirements. In such instances, the provider must submit a plan of corrections for capital improvements approved by the licensing authority, along with the required cost information.
 - 7) State and/or federal Federal regulatory requirements have generated a substantial increase in allowable costs.
- e) To be accepted for review, the written appeal shall include:
- 1) The current approved reimbursement rate, allowable costs, and the additional reimbursable costs sought through the appeal;
 - 2) A clear, concise statement of the basis for the appeal;
 - 3) A detailed statement of financial, statistical, and related information in support of the appeal, indicating the relationship between the additional reimbursable costs as submitted and the circumstances creating the need for increased reimbursement;
 - 4) A citation to any mandated or contractual requirement pertinent to the appeal; and
 - 5) A statement by the provider's chief executive officer or financial officer that the application of and information contained in the vendor's reports, schedules, budgets, books and records submitted are true and accurate.

(Source: Amended at 21 Ill. Reg. 1600, effective
JAN 27 1977)

Section 2090.90 Inspections Application-and-Certification-Process-for-Medicare Providers

- a) The Department shall conduct inspections of applicants for program certification or recertification and of certified programs to enforce compliance with this Part. Department inspection applications may be conducted as part of the certification/recertification application process, on a random basis to survey compliance with this Part, or in response to complaints, if the complaint sets forth charges that constitute grounds for sanction pursuant to Section 2090.100.
- b) Upon presentation of Department credentials, inspectors of the

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- Department shall be permitted access to inspect all physical facilities and records of the program and to make inquiries of program staff and clients.
- a) Applications may be obtained by submitting a request in writing to: Illinois Department of Alcoholism and Substance Abuse
James R. Thompson Center
Quality Assurance Certification Unit
100 West Randolph Street
Suite 5-600
Chicago 15-60604
 - b) The Department shall forward the application materials not later than 15 calendar days after receipt of the request.
 - c) Applicants for new certification will be accepted from programs which have been licensed as required by Section 2090.90(a) for at least two years for whose parent organization has Applicants shall demonstrate two years of experience in providing quality substance abuse services of the kind for which certification is being requested and for the type of population which will be served.
 - d) Applicants shall submit documentation of the following:
 - 1) Evidence of the need within the community for the type of services to be provided by the program for which certification is sought;
 - 2) Description of the organization that will be operating the program;
 - 3) Fiscal solvency of the organization;
 - 4) Description of the physical facilities to be utilized by the program;
 - 5) Description of the program and the clientele to be served;
 - 6) Projection of the total number of Medicaid clients to be served each month, the average length of stay anticipated, and the estimated average per person cost of treatment;
 - 7) Schedule of the specific dates, times and places services will be provided;
 - 8) Number and type of people served during the previous 2 years in the program for which certification is sought and a description of the people served (demographics, gender, drug of choice, Medicaid eligibility, income level, etc.);
 - 9) Name, address and professional qualifications of the program's Medical Director;
 - 10) Name and qualifications of each individual who will be staffing the program and a description of that individual's responsibilities with respect to the program;
 - 11) Copies of written referral agreements with other social service systems and primary medical care service systems within the applicant's area;
 - 12) Copies of referral agreements with other substance abuse treatment programs within the applicant's area implemented to assure availability of a full range of services as required in 77

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- 11-Adm-Code-2050-354-
- 13) quality assurance standards and utilization review processes consistent with Section 2090-50 (documentation of the program's quality assurance system and utilization review policy as applied to the program's clinical standards) which have been used for the previous 2 years, with a copy of the 2 most recent utilization review reports; and
- 14) measurable outcome evaluation process used for the past 2 years and statistics on the program's patient outcomes.
- e) Applicants who receive funding from the Department shall submit evidence that they are in compliance with 77-111-Adm-Code-2030 Subparts B-7-G and Section 2030-710 and 2030-740. Applicants who do not receive funding from BAGA shall submit copies of the two previous years' annual audits according to the standards established in 77-111-Adm-Code-2030-620 and two copies of the statistical and financial data submitted in a format required by the Department.
- f) Applications which are missing significant components or which have inadequate information shall be returned to the applicant with a statement specifying the missing or inadequate information. Completed applications may be resubmitted. Applications which are missing less significant components may be held by the Department and the applicant notified in writing of the missing information. The applicant may submit only the missing components. The Department shall hold such incomplete applications no more than 30 calendar days.
- g) The Department shall conduct an on-site inspection pursuant to Section 2090-105.
- h) Based upon the inspection conducted under subsection (g) and on the information submitted by the applicant under subsection (d), the Department will certify the program if the Department determines that:
- 1) the applicant has proven that an unmet need for the services exists in the community the program will serve;
 - 2) the organization operating the program is fiscally sound and responsible;
 - 3) the program management is experienced in business and in the delivery of substance abuse services;
 - 4) the program has sufficient written agreements with social medical and other substance abuse service providers within its area to assure proper linkage of services to an individual it intends to serve;
 - 5) the program has experience with the Medicaid-eligible population it intends to serve;
 - 6) the program has adequate physical facilities and adequate numbers of qualified alcoholism and other drug treatment professionals to provide the services;
 - 7) the program includes utilization review policies and procedures (with adequate clinical standards) and quality assurance policies and procedures as required by 77-111-Adm-Code-2090-50 and 2050-309; and
 - 8) the program has a measurable outcome evaluation process in place

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- that provides measurable indicators of improvement by program participants.
- 1) The Department shall notify the applicant in writing of its determination regarding certification.
- 1) If the Department certifies the program, it shall include the Department of Public Aid's (BPAA) Medicaid enrollment forms with the letter of certification. The applicant shall submit the completed enrollment forms along with a copy of the letter of certification to BPAA.
- 2) If the Department is not able to certify the program based on the criteria outlined in this Section, the Department shall notify the applicant in writing describing those deficiencies that will result in a denial of the certification. The applicant has 60 days after receipt of the notice to correct the deficiencies and supply the new information to the Department. If the new information indicates that the program meets the criteria of this Part, the Department shall notify the applicant under subsection (h)(1) above. If the program continues to fail to meet the requirements of this Part, the Department shall deny the application for certification. If certification is denied, the applicant may appeal the Department's decision and request a hearing pursuant to 77-111-Adm-Code-2090 (Rules of Practice and Procedure in Administrative Hearings).
- 3) Certification shall be effective on the date of approval by the Department and shall remain in effect for a period of 3 years. If the provider continues to be licensed as required by Section 2090-301a) and is subject to any sanctions levied under Section 2090-110, the month and day of Department approval shall be known as the program certification anniversary date. The program may be recertified for an additional 3-year period pursuant to Section 2090-100. After the effective date of certification, the provider may deliver services to Medicaid recipients that will be reimbursable after the applicant completes the BPAA Medicaid enrollment procedure.
- 3) The provider shall notify the Department in writing within 30 days of any changes in policies or procedures required by this Part or described in any materials submitted as part of an application for certification.

(Source: Old Section 2090.90 repealed and Section 2090.105 renumbered to Section 2090.90 and amended at 21 Ill. Reg. 1600, effective

JAN 27 1997

Section 2090.100 Sanctions for Non-Compliance/Audits Recertification

- a) Failure to comply with the requirements of this Part shall result in the provider being issued a written warning or having its certification suspended or terminated for the Illinois Medical

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Assistance Program.

- b) The Department shall issue written notification to a certified provider who has failed to comply with any provision specified in this Part. The provider shall have a maximum of 60 calendar days from the date of the written notice to correct the cited deficiencies. However, such action shall not preclude the Department from initiating proceedings as specified in subsection (g) of this Section.
- c) The Department may also conduct post-payment audits based on volume of billings, complaints, identified deficiencies or non-compliance with this Part, or pursuant to a random selection process as necessary to monitor for compliance with this Part.

- d) The Department shall audit a statistically significant randomly selected sampling of client records at the audited program.

- e) The Department shall follow the recoupment formula approved by the Department of Public Aid, should the audit result in recoupment.

- f) Upon completion of the post-payment audit the Department shall submit written notification to the program regarding audit findings and amounts determined to be recoupable. The program shall respond to the notification within 15 days with supporting documentation regarding the recoupment amount. If such documentation proves that the recoupment amount is inaccurate, the amount shall be revised. The program may also request a 100% audit. The department may reduce future payments at a percentage per month or in a lump sum, or demand repayment in a lump sum. Recoupment shall be done under the "Rules of Practice for Medical Vendor Hearings", 89 Ill. Adm. Code 104: Subpart C.

- g) The Department and the Department of Public Aid shall jointly initiate administrative proceedings pursuant to 89 Ill. Adm. Code 140.16 to suspend or terminate certification and eligibility to participate in the Illinois Medical Assistance Program where the provider has failed to comply with any provision specified in this Part.

- h) The Department shall immediately refer evidence of billing discrepancies or suspected improprieties to the Department of Public Aid for further action or may initiate post-payment audits.

- a) Any provider that wants to continue a program beyond the 3-year certification period shall apply for recertification at least 90 days prior to the anniversary date of the third year of certification.

- i) An applicant for recertification shall submit in a format specified by the Department a statement that the program continues to meet all requirements of this Part and continues to be licensed as required by Section 2090.30(a). This statement shall be signed by the Authorized Program Representative of the provider. If any of the information submitted under Section 2090.90 has changed since the original certification, the applicant shall resubmit that information in a corrected form.

- A) Copies of all utilization review (UR) reports since the date of last certification and of the current UR policies and procedures:

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- B) Results of the program's measured outcome evaluations since the date of last certification or recertification.
- 2) go be eligible for recertification providers who receive funding from the Department shall be in compliance with 77 Ill. Adm. Code 2090-Subparts B7-67 and Sections 2090.710 and 2090.740.
- 3) Providers who do not receive funding from the Department shall submit one copy of all annual audit(s) during the previous certification period, according to the standards established in 77 Ill. Adm. Code 2090-620 (Audit Requirements), and two copies of statistical and financial data submitted on forms required by the Department.

- 4) The Department shall review the program and conduct the inspection required in Section 2090.105, and shall recertify the program if it complies with the requirements of the Alcoholism and Other Drug Abuse and Dependency Act and this Part.

- 5) If the Department is not able to recertify the program based on its review and inspection, the Department shall notify the applicant in writing describing those deficiencies that will result in a denial of the recertification. The applicant has 30 days after receipt of the notice to correct the deficiencies and supply the new information to the Department. If the new information indicates that the program meets the criteria of this Part, the Department shall recertify the program. If the program continues to fail to meet the requirements of this Part, the Department shall deny the application for recertification and shall notify the applicant in writing giving the reasons for the denial. The provider may appeal the Department's decision and request a hearing pursuant to 77 Ill. Adm. Code 2090 (Rules of Practice and Procedure in Administrative Hearings). Certification shall remain in effect pending the Department's final decision on recertification. When the denial of recertification is final, the provider shall arrange for transfer of all Medicaid clients of the program as appropriate.

b) Inspections

- i) The Department shall conduct inspections of providers certified under this Part to enforce compliance with provisions of this Part.

- 2) The Department inspectors shall be granted access to all facilities and service areas of client records and all other records required under this Part.

(Source: Old Section 2090.100 repealed and Section 2090.110 renumbered to Section 2090.100 and amended at 21 Ill. Reg. 1600, effective JAN 2 1997)

Section 2090.105 Inspections (Renumbered)

(Source: Section 2090.105 renumbered to Section 2090.90 at 21 Ill. Reg.

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~~1600~~¹⁶⁰⁰ =, effective ~~JAN 24 1997~~^{JAN 24 1997}

Section 2090.110 Sanctions for Non-Compliance/Audits (Renumbered)

(Source: Section 2090.110 renumbered to Section 2090.100 at 21 Ill. Reg.

~~1600~~¹⁶⁰⁰ =, effective ~~JAN 24 1997~~^{JAN 24 1997})

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

1) Heading of the Part: Pay Plan

2) Code Citation: 80 Ill. Adm. Code 310

3) Section Numbers: Adopted Action:
310.100 Amended
310.270 Amended
310.280 Amended
310.290 Amended
310.Appendix A, Table D Amended
310.Appendix A, Table J Amended

4) Statutory Authority: Authorized by Section 8 and 8a of the Personnel Code [20 ILCS 415/8 and 8a].

5) Effective Date of Rulemaking: January 22, 1997

6) Does this rulemaking contain an automatic repeal date? No

7) Does this rulemaking contain incorporations by reference? No

8) Date Filed in Agency's Principal Office: January 22, 1997

9) Notice of Proposal Published in Illinois Register: October 11, 1996, Issue #41, 20 Ill. Reg. 13102

10) Has JCAR issued a Statement of Objections to these rules? No

11) Difference(s) between proposal and final version:

1. In lines 419 and 423, the duplicative numbering was deleted in Section 310.100 as recommended by the Joint Committee on Administrative Rules.
2. In lines 498 - 500, the text for Fiscal Year 1996 was deleted as adopted in a previous amendment (20 Ill. Reg. 15018).
3. In line 1246, the effective date for the Lottery Telemarketing Representative was incorporated in Section 310. Table J as adopted by Peremptory Amendment (Issue 41, 20 Ill. Reg. 13408).

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

13) Will this rulemaking replace an emergency rule currently in effect? No

14) Are there any amendments pending on this Part? Yes

Section Numbers Adopted Action Illinois Register Citation

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

310.230 Amended 20 Ill. Reg. 15804
(December 13, 1996)
310.230 Amended 21 Ill. Reg. 732
(January 17, 1997)

15) Summary and Purpose of Rulemaking:

In Section 310.100, Other Pay Provisions, a previous revision was incorporated unto this Section changing Step 1a to Step 1c as the entrance salary of the Schedule of Salary Grades and AFSCME Collective Bargaining Unit schedules.

In Section 310.270, Legislated and Contracted Rate, the Arbitrator's annual salary was revised from \$70,666 to \$79,999.

In Section 310.280, Designated Rate, the following updates reflect changes that were already approved by the Governor.

In the Department of Insurance, the Senior Public Administrator's annual salary was revised from \$94,274 to \$97,100.

In the Department of Natural Resources, the Designated Rate for a Public Service Administrator position was deleted.

In Section 310.290, Out-of-State or Foreign Service Rate, the minimum monthly rates for the Revenue Auditor III were corrected from \$3,685 to \$3,383 for States other than California and New Jersey, and from \$3,709 to \$3,825 for California and New Jersey.

In Section 310.296 J RC-014 (Clerical Employees, AFSCME), the Telecommunicator Specialist (\$2,153-\$3,060) and Telecommunicator Lead Specialist (\$2,373-\$3,399) titles were added to the RC-014 Collective Bargaining Unit.

16) Information and questions regarding these adopted amendments shall be directed to:

Name: Mr. Michael Murphy
Address: Department of Central Management Services
Division of Technical Services
504 William G. Stratton Building
Springfield, Illinois 62706
Telephone: (217) 782-5601

The full text of the Adopted Amendment begins on the next page:

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES
SUBTITLE B: PERSONNEL RULES, PAY PLANS, AND
POSITION CLASSIFICATIONS
CHAPTER I: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

PART 310
PAY PLAN

SUBPART A: NARRATIVE

Section	Policy and Responsibilities
310.20	Jurisdiction
310.30	Pay Schedules
310.40	Definitions
310.50	Conversion of Base Salary to Pay Period Units
310.60	Conversion of Base Salary to Daily or Hourly Equivalents
310.70	Increases in Pay
310.80	Decreases in Pay
310.90	Other Pay Provisions
310.100	Implementation of Pay Plan Changes for Fiscal Year 1997
310.110	Interpretation and Application of Pay Plan
310.120	Effective Date
310.130	Reinstitution of Within Grade Salary Increases
310.140	Fiscal Year 1985 Pay Changes in Schedule of Salary Grades, Effective July 1, 1984 (Repealed)
310.150	

SUBPART B: SCHEDULE OF RATES

Section	Part-time Daily or Hourly Special Services Rate
310.205	Introduction
310.210	Prevailing Rate
310.220	Negotiated Rate
310.230	Hourly Rate
310.240	Member, Patient and Inmate Rate
310.250	Trainee Rate
310.260	Legislated and Contracted Rate
310.270	Designated Rate
310.280	Out-of-State or Foreign Service Rate
310.290	Educator Schedule for RC-063 and HR-010
310.300	Physician Specialist Rate
310.310	Annual Compensation Ranges for Executive Director and Assistant Executive Director, State Board of Elections
310.320	Excluded Classes Rate (Repealed)
310.330	

SUBPART C: MERIT COMPENSATION SYSTEM

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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Section	
310.410	Jurisdiction
310.420	Objectives
310.430	Responsibilities
310.440	Merit Compensation Salary Schedule
310.450	Procedures for Determining Annual Merit Increases
310.455	Intermittent Merit Increase
310.456	Merit Zone (Repealed)
310.460	Other Pay Increases
310.470	Adjustment
310.480	Decreases in Pay
310.490	Other Pay Provisions
310.495	Broad-Band Pay Range Classes
310.500	Definitions
310.510	Conversion of Base Salary to Pay Period Units
310.520	Conversion of Base Salary to Daily or Hourly Equivalents
310.530	Implementation
310.540	Annual Merit Increase Guidechart for Fiscal Year 1997
310.550	Fiscal Year 1985 Pay Changes in Merit Compensation System, effective July 1, 1984 (Repealed)

APPENDIX A

TABLE A	Negotiated Rates of Pay	State of
HR-190	(Department of Central Management Services - SEIU)	Illinois Building
NR-916	(Department of Natural Resources, Teamsters)	
HR-200	(Department of Labor - Chicago, Illinois - SEIU)	
RC-069	(Firefighters, AFSCME)	
TABLE D	HR-001 (Teamsters Local #726)	
TABLE E	RC-020 (Teamsters Local #330)	
TABLE F	RC-019 (Teamsters Local #25)	
TABLE G	RC-045 (Automotive Mechanics, IFPE)	
TABLE H	RC-006 (Corrections Employees, AFSCME)	
TABLE I	RC-009 (Institutional Employees, AFSCME)	
TABLE J	RC-014 (Clerical Employees, AFSCME)	
TABLE K	RC-023 (Registered Nurses, INA)	
TABLE L	RC-008 (Boilermakers)	
TABLE M	RC-110 (Conservation Police Lodge)	
TABLE N	RC-010 (Professional Legal Unit, AFSCME)	
TABLE O	RC-028 (Paraprofessional Human Services Employees, AFSCME)	
TABLE P	RC-029 (Paraprofessional Investigatory and Law Enforcement Employees, IFPE)	
TABLE Q	RC-033 (Meat Inspectors, IFPE)	
TABLE R	RC-042 (Residual Maintenance Workers, AFSCME)	
TABLE S	HR-012 (Fair Employment Practices Employees, SEIU)	
TABLE T	HR-010 (Teachers of Deaf, IFT)	
TABLE U	HR-010 (Teachers of Deaf, Extracurricular Paid Activities)	
TABLE V	CU-500 (Corrections, Meet and Confer Employees)	
TABLE W	RC-062 (Technical Employees, AFSCME)	

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TABLE X	RC-063 (Professional Employees, AFSCME)
TABLE Y	RC-063 (Educators, AFSCME)
TABLE Z	RC-063 (Physicians, AFSCME)
APPENDIX B	Schedule of Salary Grades - Monthly Rates of Pay for Fiscal Year 1997
APPENDIX C	Medical Administrator Rates for Fiscal Year 1997
APPENDIX D	Merit Compensation System Salary Schedule for Fiscal Year 1997
APPENDIX E	Teaching Salary Schedule (Repealed)
APPENDIX F	Physician and Physician Specialist Salary Schedule (Repealed)
APPENDIX G	Broad-Band Pay Range Classes Salary Schedule

AUTHORITY: Implementing and authorized by Sections 8 and 8a of the Personnel Code [20 ILCS 415/8 and 8a].

SOURCE: Filed June 28, 1967; codified at 8 Ill. Reg. 1558; emergency amendment at 8 Ill. Reg. 1990, effective January 31, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 2440, effective February 15, 1984; emergency amendment at 8 Ill. Reg. 3348, effective March 5, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 4249, effective March 16, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 5704, effective April 16, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 7290, effective May 11, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 11299, effective June 25, 1984; emergency amendment at 8 Ill. Reg. 12616, effective July 1, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 15007, effective August 6, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 15367, effective August 13, 1984; emergency amendment at 8 Ill. Reg. 21310, effective October 10, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 21544, effective October 24, 1984; amended at 8 Ill. Reg. 22844, effective November 14, 1984; emergency amendment at 9 Ill. Reg. 1134, effective January 16, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 1320, effective January 23, 1985; amended at 9 Ill. Reg. 3681, effective March 12, 1985; emergency amendment at 9 Ill. Reg. 4163, effective March 15, 1985, for a maximum of 150 days; emergency amendment at 9 Ill. Reg. 9231, effective May 31, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 9420, effective June 7, 1985; amended at 9 Ill. Reg. 10663, effective July 1, 1985; emergency amendment at 9 Ill. Reg. 15043, effective September 24, 1985, for a maximum of 150 days; emergency amendment at 10 Ill. Reg. 3325, effective January 22, 1986; amended at 10 Ill. Reg. 3230, effective January 24, 1986; emergency amendment at 10 Ill. Reg. 8904, effective May 13, 1986, for a maximum of 150 days; emergency amendment at 10 Ill. Reg. 8928, effective May 13, 1986; emergency amendment at 10 Ill. Reg. 12090, effective June 30, 1986, for a maximum of 150 days; emergency amendment at 10 Ill. Reg. 13675, effective July 31, 1986; emergency amendment at 10 Ill. Reg. 14867, effective August 26, 1986; amended at 10 Ill. Reg. 15567, effective September 17, 1986; emergency amendment at 10 Ill. Reg. 17765, effective September 30, 1986, for a maximum of 150 days; emergency amendment at 10 Ill. Reg. 19132, effective October 28, 1986; emergency amendment at 10 Ill. Reg. 21097, effective December 9, 1986; amended at 11 Ill. Reg. 648, effective December 22, 1986; emergency amendment at 11 Ill. Reg.

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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3363, effective February 3, 1987; peremptory amendment at 11 Ill. Reg. 4388, effective February 27, 1987; peremptory amendment at 11 Ill. Reg. 6291, effective March 23, 1987; amended at 11 Ill. Reg. 5901, effective March 24, 1987; emergency amendment at 11 Ill. Reg. 8787, effective April 15, 1987, for a maximum of 150 days; emergency amendment at 11 Ill. Reg. 11830, effective July 1, 1987, for a maximum of 150 days; peremptory amendment at 11 Ill. Reg. 13675, effective July 29, 1987; amended at 11 Ill. Reg. 14984, effective August 27, 1987; peremptory amendment at 11 Ill. Reg. 15273, effective September 1, 1987; peremptory amendment 11 Ill. Reg. 17919, effective October 19, 1987; peremptory amendment at 11 Ill. Reg. 19812, effective November 19, 1987; emergency amendment at 11 Ill. Reg. 20664, effective December 4, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 20778, effective December 11, 1987; peremptory amendment at 12 Ill. Reg. 3811, effective January 27, 1988; peremptory amendment at 12 Ill. Reg. 5459, effective March 3, 1988; amended at 12 Ill. Reg. 6073, effective March 21, 1988; peremptory amendment at 12 Ill. Reg. 7783, effective April 14, 1988; emergency amendment at 12 Ill. Reg. 7734, effective April 15, 1988, for a maximum of 150 days; peremptory amendment at 12 Ill. Reg. 8135, effective April 22, 1988; peremptory amendment at 12 Ill. Reg. 9745, effective May 23, 1988; emergency amendment at 12 Ill. Reg. 11778, effective July 1, 1988, for a maximum of 150 days; emergency amendment at 12 Ill. Reg. 12895, effective July 18, 1988, for a maximum of 150 days; peremptory amendment at 12 Ill. Reg. 13306, effective July 27, 1988; corrected at 12 Ill. Reg. 13359; amended at 12 Ill. Reg. 14630, effective September 6, 1988; amended at 12 Ill. Reg. 20449, effective November 28, 1988; peremptory amendment at 12 Ill. Reg. 20584, effective November 28, 1988; peremptory amendment at 13 Ill. Reg. 8080, effective May 10, 1989; amended at 13 Ill. Reg. 8849, effective May 30, 1989; peremptory amendment at 13 Ill. Reg. 8970, effective May 26, 1989; emergency amendment at 13 Ill. Reg. 10967, effective June 20, 1989, for a maximum of 150 days; emergency amendment expired on November 17, 1989; amended at 13 Ill. Reg. 11451, effective June 28, 1989; emergency amendment at 13 Ill. Reg. 11854, effective July 1, 1989, for a maximum of 150 days; corrected at 13 Ill. Reg. 12647; peremptory amendment at 13 Ill. Reg. 12887, effective July 24, 1989; amended at 13 Ill. Reg. 16950, effective October 20, 1989; amended at 13 Ill. Reg. 19221, effective December 12, 1989; amended at 14 Ill. Reg. 615, effective January 2, 1990; peremptory amendment at 14 Ill. Reg. 1627, effective January 11, 1990; amended at 14 Ill. Reg. 4455, effective March 12, 1990; peremptory amendment at 14 Ill. Reg. 7652, effective May 7, 1990; amended at 14 Ill. Reg. 10002, effective June 11, 1990; emergency amendment at 14 Ill. Reg. 11330, effective June 29, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 14361, effective August 24, 1990; emergency amendment at 14 Ill. Reg. 15570, effective September 11, 1990, for a maximum of 150 days; emergency amendment expired on February 8, 1991; corrected at 14 Ill. Reg. 16092; peremptory amendment at 14 Ill. Reg. 17098, effective September 26, 1990; amended at 14 Ill. Reg. 17189, effective October 2, 1990; amended at 14 Ill. Reg. 18719, effective November 13, 1990; peremptory amendment at 14 Ill. Reg. 18854, effective November 13, 1990; peremptory amendment at 15 Ill. Reg. 663, effective January 7, 1991; amended at 15 Ill. Reg. 3296, effective February 14,

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1991; amended at 15 Ill. Reg. 4401, effective March 11, 1991; peremptory amendment at 15 Ill. Reg. 5100, effective March 20, 1991; peremptory amendment at 15 Ill. Reg. 5465, effective April 2, 1991; emergency amendment at 15 Ill. Reg. 10485, effective July 1, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 11080, effective July 19, 1991; amended at 15 Ill. Reg. 13080, effective August 21, 1991; amended at 15 Ill. Reg. 14210, effective September 23, 1991; emergency amendment at 16 Ill. Reg. 711, effective December 26, 1991, for a maximum of 150 days; amended at 16 Ill. Reg. 3450, effective February 20, 1992; peremptory amendment at 16 Ill. Reg. 5068, effective March 11, 1992; peremptory amendment at 16 Ill. Reg. 7056, effective April 20, 1992; emergency amendment at 16 Ill. Reg. 8239, effective May 19, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 8382, effective May 26, 1992; emergency amendment at 16 Ill. Reg. 13950, effective August 19, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 14452, effective September 4, 1992, for a maximum of 150 days; amended at 17 Ill. Reg. 238, effective December 23, 1992; peremptory amendment at 17 Ill. Reg. 498, effective December 18, 1992; amended at 17 Ill. Reg. 590, effective January 4, 1993; amended at 17 Ill. Reg. 1819, effective February 2, 1993; amended at 17 Ill. Reg. 6441, effective April 8, 1993; emergency amendment at 17 Ill. Reg. 12900, effective July 22, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 13409, effective July 29, 1993; emergency amendment at 17 Ill. Reg. 13789, effective August 9, 1993, for a maximum of 150 days; emergency amendment at 17 Ill. Reg. 14666, effective August 26, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 19103, effective October 25, 1993; emergency amendment at 17 Ill. Reg. 21858, effective December 1, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 22514, effective December 15, 1993; amended at 18 Ill. Reg. 227, effective December 17, 1993; amended at 18 Ill. Reg. 1107, effective January 18, 1994; amended at 18 Ill. Reg. 5146, effective March 21, 1994; peremptory amendment at 18 Ill. Reg. 9562, effective June 13, 1994; emergency amendment at 18 Ill. Reg. 11299, effective July 1, 1994, for a maximum of 150 days; peremptory amendment at 18 Ill. Reg. 13476, effective August 17, 1994; emergency amendment at 18 Ill. Reg. 14417, effective September 9, 1994, for a maximum of 150 days; amended at 18 Ill. Reg. 16545, effective October 31, 1994; peremptory amendment at 18 Ill. Reg. 16708, effective October 28, 1994; amended at 18 Ill. Reg. 17191, effective November 21, 1994; amended at 19 Ill. Reg. 1024, effective January 24, 1995; peremptory amendment at 19 Ill. Reg. 2481, effective February 17, 1995; peremptory amendment at 19 Ill. Reg. 3073, effective February 17, 1995; amended at 19 Ill. Reg. 3456, effective March 7, 1995; peremptory amendment at 19 Ill. Reg. 5145, effective March 14, 1995; amended at 19 Ill. Reg. 6452, effective May 2, 1995; peremptory amendment at 19 Ill. Reg. 6688, effective May 1, 1995; amended at 19 Ill. Reg. 7841, effective June 1, 1995; amended at 19 Ill. Reg. 8156, effective June 12, 1995; amended at 19 Ill. Reg. 9096, effective June 27, 1995; emergency amendment at 19 Ill. Reg. 11954, effective August 1, 1995, for a maximum of 150 days; peremptory amendment at 19 Ill. Reg. 13979, effective September 19, 1995; peremptory amendment at 19 Ill. Reg. 15103, effective October 12, 1995; amended at 19 Ill. Reg. 16160, effective November 28, 1995; amended at 20 Ill. Reg. 308, effective December 22, 1995; emergency amendment at 20 Ill. Reg. 4060, effective February 27,

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1996, for a maximum of 150 days; peremptory amendment at 20 Ill. Reg. 6334, effective April 22, 1996; peremptory amendment at 20 Ill. Reg. 7434, effective May 14, 1996; amended at 20 Ill. Reg. 8301, effective June 11, 1996; amended at 20 Ill. Reg. 8657, effective June 20, 1996; amended at 20 Ill. Reg. 9006, effective June 26, 1996; emergency amendment at 20 Ill. Reg. 10213, effective July 15, 1996, for a maximum of 150 days; amended at 20 Ill. Reg. 10841, effective August 5, 1996; peremptory amendment at 20 Ill. Reg. 13408, effective September 24, 1996; amended at 20 Ill. Reg. 15018, effective November 7, 1996; peremptory amendment at 20 Ill. Reg. 15092, effective November 7, 1996; amended at 21 Ill. Reg. 1620, effective JAN 2 2 1997.

SUBPART A: NARRATIVE

Section 310.100 Other Pay Provisions

- a) Transfer -- Upon the assignment of an employee to a vacant position in a class with the same salary grade as the class for the position being vacated, the employee's base salary will not be changed. Upon separation from a position of a given class and subsequent appointment to a position in the same salary grade, no increase in salary will be given.
- b) Entrance Salary -- Normally upon original entry to state service, an employee's base salary will be at Step 1C ~~1A~~ of the salary grade.
 - 1) Qualifications above Minimum Requirements --
 - A) If a candidate possesses directly related training and experience in excess of the minimum requirements of the class specification, the entrance salary may be up to Step 3 as determined by the employing agency. The salary offered should not provide more than a 10% increase over the candidate's current salary.
 - B) Such qualifications above the minimum requirements must possess documented support for higher than the Step 1C ~~1A~~ entrance salary. An entrance salary higher than Step 3 must have prior approval from the Director of Central Management Services.
 - 2) Area Differential -- For positions where additional compensation is required because of dissimilar economic or other conditions in the geographical area in which such positions are established, a higher entrance step may be authorized by the Director of Central Management Services. Present employees receiving less than the new rate shall be advanced to the new rate.
 - 3) Upon the geographical transfer from or to an area for which additional compensation has been authorized, an employee will receive an adjustment to the appropriate salary level for the new geographical area of assignment effective the first day of the month following date of approval.
- c) Differential and Overtime Pay -- An eligible employee may have an amount added to his/her base salary for a given pay period for work

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performed which is in excess of the normal requirements for the position and work schedule, as follows:

- 1) Shift Differential Pay -- An employee may be paid an amount in addition to his/her base salary for work performed on a regularly scheduled second or third shift. The additional compensation will be at a rate and in a manner approved by the Department of Central Management Services. The Director of Central Management Services will approve the manner and rate of this provision after considering the need of the employing agency, the treatment of other similar situations, prevailing practices of other employers, and the equity of the particular circumstances.
- 2) Overtime Pay --
 - A) The Director of Central Management Services will maintain a list of titles whose incumbents are eligible for overtime at a time and one-half rate for all hours actually worked in excess of the normal work schedule in any given work week. Overtime shall be paid in cash only unless an employee requests compensatory time off at the time and one-half rate. Such request shall be considered and granted or denied by the agency in light of their operating needs. The employee shall make his/her choice known to the agency not later than the end of the work week in which the overtime was earned. If such compensatory time request is granted it shall be taken within the fiscal year it was earned at a time convenient to the employee and consistent with the operating needs of the agency. Accrued compensatory time not used by the end of the fiscal year in which it was earned shall be liquidated and paid in cash at the rate it was earned.
 - B) A list will also be maintained by the Director of Central Management Services of titles whose incumbents are eligible for straight-time overtime. Employees in these classes of positions who are assigned and perform work in excess of the normal work schedule as established by the agency shall be compensated at a straight-time rate on either a cash or compensatory time-off basis, as determined by the agency in light of their operating needs, for all hours worked in excess of a normal work week. Overtime in less than one-half hour increments per day shall not be accrued. If compensatory time is not liquidated within the fiscal year during which it is accrued, it must be liquidated at the end of the fiscal year in cash at the employee's rate of pay in effect at the time of liquidation.
 - 3) Incentive Pay -- An employee may be paid an amount in addition to his/her base salary for work performed in excess of the normal work standard as determined by agency management. The additional compensation shall be at a wage rate and in a manner approved by the Director of the Department of Central Management Services.

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The Director of Central Management Services will approve the manner and rate of this provision after considering the need of the employing agency, the treatment of other similar situations, prevailing practices of other employers, and the equity of the particular circumstances.

- 4) Extra Duty Pay -- An employee may be paid an amount in addition to his/her base salary for service in addition to the regular work schedule on a special work assignment. Additional compensation will be at a rate and in a manner approved by the Director of the Department of Central Management Services. The Director of Central Management Services will approve the manner and rate of this provision after considering the need of the employing agency, the treatment of other similar situations, prevailing practices of other employers, and the equity of the particular circumstances.

- d) Part-time Work -- Part-time employees whose base salary is other than an hourly or daily basis shall be paid on a daily basis which will be computed from annual rates of salary and the total number of work days in the year.

- e) Out-of-State Assignment -- Employees who are assigned to work out-of-state on a temporary basis may receive an appropriate differential during the period of the assignment, as approved by the Director of Central Management Services. The Director of Central Management Services will approve the manner and rate of this provision after considering the need of the employing agency, the treatment of other similar situations, prevailing practices of other employers, and the equity of the particular circumstances.

- f) Lump Sum Payment -- Shall be provided for accrued vacation, sick leave* and unused compensatory overtime at the current base rate to those employees separated from employment under the Personnel Code. Leaves of absence and temporary lay-off (per 80 Ill. Adm. Code 302.510) are not separations and therefore lump sum cannot be given in these transactions. Method of computation is explained in Section 310.70(a) of this Part.

AGENCY NOTE -- The method to be used in computing the lump sum payment for accrued vacation, sick leave* and unused compensatory overtime payment for an incumbent entitled to shift differential during his/her regular work hours will be to use his/her current base salary plus the shift differential pay.

*This compensatory sick leave is for sick leave earned and not taken since January 1, 1984. It is to be liquidated at one half rate.

- g) Salary Treatment Upon Return From Leave -- An employee returning from Military Leave, Peace Corps Leave, Vista Leave, Service-Connected Disability Leave, Leave to accept a Temporary, Emergency, Provisional, Exempt or Trainee position, or Educational Leave will be placed on the step which reflects satisfactory performance increases to which he/she would have been entitled during his/her period of leave. Creditable service date will be maintained. An employee returning to his/her

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former salary grade from any other leave of over fourteen days will be placed at the step on which he/she was situated prior to his/her leave, and his/her creditable service date will be extended by the duration of the leave.

- h) Salary Treatment Upon Reemployment --

1) Upon the reemployment of an employee in a class with the same salary grade as the class for the position held before layoff, the employee will be placed at the same salary step as held at the time of the layoff, and his/her creditable service date will be adjusted to reflect that time on layoff does not count as creditable service time.

2) Upon the reemployment of an employee in a class at a lower salary range than the range of the class for the position held before layoff, the employee will be placed at the step in the lower salary grade which provides the base salary nearest in amount to, but less than, the current value of the step held at the time of layoff, and his/her creditable service date will be adjusted to reflect that time on layoff does not count as creditable service time.

- i) Reinstatement -- The salary upon reinstatement of an employee will be as determined by the employing agency and approved by the Director of Central Management Services. This salary should not provide more than a 10% increase over the candidate's current salary or exceed the current value of the salary step held in the position where previously certified. In no event is the resulting salary to be lower than the minimum rate or higher than the maximum rate of the salary range.

- j) Extended Service Payment --

1) Effective July 1, 1994, the Step 7 rate shall be increased by \$25.00 per month for those employees who have attained ten (10) years of service and have three (3) years of creditable service on Step 7 in the same pay grade.

2) Effective July 1, 1994, the Step 7 rate shall be increased by \$50.00 per month for those employees who have attained fifteen (15) years of service and have three (3) years of creditable service on Step 7 in the same pay grade.

- k) Bi-Lingual Pay --

1) Effective October 1, 1994, individual positions whose job descriptions require the use of sign language or a second language shall receive an additional 4% or \$75.00 per month whichever is greater in addition to the employee's base rate.

2) Effective July 1, 1995, individual positions whose job descriptions require the use of sign language or a second language shall receive an additional 5% or \$100.00 per month whichever is greater in addition to the employee's base rate.

(Source: Amended at 21 Ill. Reg. 1629, effective JAN 2 1994)

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SUBPART B: SCHEDULE OF RATES

Section 310.270 Legislated and Contracted Rate

The rate of pay for employees occupying positions which require payment in accordance with specified rates set forth in legislation or by contract. The positions and rates of pay in this Section are as follows:

Arbitrator	<u>Annual Salary</u>
	\$79,999
	\$76,666

When an Arbitrator is serving as an acting Commissioner of the Illinois Industrial Commission, the appropriate rate will be the same as the rate set for a Commissioner.

(Source: Amended at 21 Ill. Reg. **1629**, effective

JAN 24 1997)

Section 310.280 Designated Rate

The rate of pay for a specific position or class of positions where it is deemed desirable to exclude such from the other requirements of this Pay Plan shall be only as designated by the Governor.

Department of Children & Family Services

Private Secretary II	<u>Annual Salary</u>
(Pos. No. 34202-16-00-000-03-30)	43,452

Department of Commerce & Community Affairs

Economic Development Representative II	<u>Annual Salary</u>
(Pos. No. 12932-42-35-140-30-01)	50,400
Private Secretary II	<u>Annual Salary</u>
Pos. No. 34202-42-00-000-01-02)	43,164
Public Information Officer IV	<u>Annual Salary</u>
(Pos. No. 37004-42-00-073-10-01)	54,552
Public Service Administrator	<u>Annual Salary</u>
(Pos. No. 37015-42-35-140-20-01)	65,592

Department of Insurance

Senior Public Service Administrator	<u>Annual Salary</u>
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(Pos. No. 40070-14-00-000-00-06)

97,100
94,274

Department of Mental Health and Developmental Disabilities

Medical Administrator I, Option D	<u>Annual Salary</u>
(Pos. No. 26401-22-59-903-10-02)	131,250

Medical Administrator II, Option D	<u>Annual Salary</u>
(Pos. No. 26403-22-66-260-00-01)	142,000

Private Secretary II	<u>Annual Salary</u>
(Pos. No. 34202-22-15-000-00-01)	41,004

Department of Natural Resources

Public Service Administrator	<u>Annual Salary</u>
(Pos. No. 37015-12-14-230-00-03)	72,000

Department of Revenue

Public Service Administrator	<u>Annual Salary</u>
(Pos. No. 37015-25-12-000-00-01)	69,744

Department of State Police

Senior Public Service Administrator	<u>Annual Salary</u>
(Pos. No. 40070-21-10-000-00-01)	85,153

(Source: Amended at 21 Ill. Reg. **1629**, effective

JAN 24 1997)

Section 310.290 Out-of-State or Foreign Service Rate

The rate of pay for employees occupying positions which require payment in accordance with the economic conditions and social legislation of another state or foreign country. An adjustment may be made to the salary of an employee stationed in a foreign country to compensate for a change in the currency exchange rate. The Director of the Department of Central Management Services will, before approving an adjustment, consider the need of the employing agency, the treatment of other similar situations, prevailing practices of other employers, and the equity of the particular circumstances.

Effective
Fiscal Year 1997

Foreign Service Economic Development Executive I

3256-5814

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Foreign Service Economic Development Executive II	4170-7619
Foreign Service Economic Development Representative	2767-4984
Office Administrator IV (States Other Than California and New Jersey) (CA, NJ)	2175-3651 2458-4128
Office Assistant (Foreign Service)	1719-2320
Office Associate (States Other Than California and New Jersey) (CA, NJ)	1839-2521 2079-2850
Public Service Administrator (States Other Than California and New Jersey) (CA, NJ)	2916-6189 3297-6997
Office Coordinator (States Other Than California and New Jersey) (CA, NJ)	1909-2630 2158-2973
Revenue Auditor I (States Other Than California and New Jersey) (CA, NJ)	2601-3717 2941-4202
Revenue Auditor II (States Other Than California and New Jersey) (CA, NJ)	3033-4392 3428-4965
Revenue Auditor III (States Other Than California and New Jersey) (CA, NJ)	33833605-4932 <u>38253709-5576</u>
Revenue Auditor Trainee (States Other Than California and New Jersey) (CA, NJ)	2168-3031 2451-3427
Revenue Tax Specialist I (States Other Than California and New Jersey) (CA, NJ)	2168-3031 2451-3427
Revenue Tax Specialist II (States Other Than California and New Jersey) (CA, NJ)	2371-3357 2681-3795
Revenue Tax Specialist Trainee (States Other Than California and New Jersey)	1983-2753

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(CA, NJ)	2241-3112
Senior Public Service Administrator (States Other Than California and New Jersey) (CA, NJ)	4018-9168 4542-10364
(Source: Amended at 21 Ill. Reg. 1629 - , effective 11/2/83)	

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Section 310. APPENDIX A Negotiated Rates of Pay
Section 310. TABLE D HR-001 (Teamsters Local #726)

A) Department of Transportation - Division of Highways - Emergency Patrol - Northeast Region - (Cook)	July 1, 1994		July 1, 1995		July 1, 1996	
	Mo.	Hr.	Mo.	Hr.	Mo.	Hr.
Highway Maintainer	3115.00	17.90	3245.00	18.65	3385.00	19.45
Highway Maintenance Lead Worker	3244.00	18.64	3374.00	19.39	3514.00	20.20
Highway Maintenance Lead Worker (Lead Lead Worker)	3294.00	18.93	3424.00	19.68	3564.00	20.48
Maintenance Worker	3059.00	17.58	3189.00	18.33	3329.00	19.13
B) Department of Transportation - Division of Highways - Northeast Region - (Cook)	July 1, 1994		July 1, 1995		July 1, 1996	
	Mo.	Hr.	Mo.	Hr.	Mo.	Hr.
Heavy Construction Equipment Operator	3139.00	18.04	3259.00	18.73	3384.00	19.45
Heavy Construction Equipment Operator (Bridge Crew)	3156.40	18.14	3302.50	18.98	3453.60	19.85
Highway Maintainer	3040.00	17.47	3160.00	18.16	3285.00	18.88
Highway Maintenance (Tractor Mower)	3057.40	17.57	3203.50	18.41	3354.60	19.28
Highway Maintenance Lead Worker	3040.00	17.47	3160.00	18.16	3285.00	18.88
Highway Maintenance Lead Worker (Bridge Crew)	3169.00	18.21	3289.00	18.90	3414.00	19.62
Highway Maintenance Lead Worker (Bridge Crew)	3186.40	18.31	3332.50	19.15	3483.60	20.02
Highway Maintenance Lead Worker	3219.00	18.50	3339.00	19.19	3464.00	19.91
Highway Maintenance Lead Worker (Lead Lead Worker)	3236.40	18.60	3382.50	19.44	3533.60	20.31
Highway Maintenance Lead Worker (Lead Lead Worker-Bridge Crew)	2948.00	16.94	3068.00	17.63	3193.00	18.35
Laborer (Maintenance)	2984.00	17.15	3104.00	17.84	3229.00	18.56
Maintenance Worker						
C) Departments of Mental Health & Developmental Disabilities, Public Health, Rehabilitation Services, and Employment Security - Northeast	July 1, 1994		July 1, 1995		July 1, 1996	
	Mo.	Hr.	Mo.	Hr.	Mo.	Hr.

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Region - (Cook)

	July 1, 1994		July 1, 1995		July 1, 1996	
	Mo.	Hr.	Mo.	Hr.	Mo.	Hr.
Maintenance Equipment Operator	3040.00	17.47	3160.00	18.16	3285.00	18.88
Maintenance Equipment Operator (Dispatcher)	3214.00	18.47	3334.00	19.16	3459.00	19.88
Maintenance Worker	2893.00	16.63	3013.00	17.32	3138.00	18.03
D) Departments of Central Management Services, Children and Family Services, and Public Aid - Northeast Region - (Cook)						
	July 1, 1994		July 1, 1995		July 1, 1996	
	Mo.	Hr.	Mo.	Hr.	Mo.	Hr.
Grounds Supervisor	2926.00	16.82	3046.00	17.51	3171.00	18.22
Grounds Supervisor (Chicago-Read)	3093.00	17.78	3213.00	18.47	3338.00	19.18
Grounds Supervisor (Supervising Tractor Trailer Drivers)	3213.00	18.47	3333.00	19.16	3458.00	19.87
Maintenance Worker	2893.00	16.63	3013.00	17.32	3138.00	18.03
Maintenance Worker (Chicago-Read)	3040.00	17.47	3160.00	18.16	3285.00	18.88
Maintenance Equipment Operator	3040.00	17.47	3160.00	18.16	3285.00	18.88
Maintenance Equipment Operator (Tractor Trailer)	3101.00	17.82	3221.00	18.51	3346.00	19.23

(Source: Amended at 21 Ill. Reg. 1629, effective JAN 27, 1996)

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Section 310. TABLE J RC-014 (Clerical Employees, AFSCME)

Effective: July 1, 1994

	S T E P S			
	1	2	3	
Account Clerk I	1447	1490	1540	1591
Account Clerk II	1546	1592	1647	1705
Account Technician I	1724	1776	1853	1920
Account Technician II	1885	1942	2024	2100
Administrative Services Worker Trainee	1324	1364	1401	1441
Aircraft Dispatcher	1885	1942	2024	2100
Aircraft Lead Dispatcher	2062	2124	2216	2309
Audio Visual Technician I	1495	1540	1592	1644
Audio Visual Technician II	1660	1710	1774	1843
Buyer Assistant	1724	1776	1853	1920
Check Issuance Machine Operator	1660	1710	1774	1843
Clerical Trainee	TR			
Communication Dispatcher	1660	1710	1774	1843
Communication Equipment Technician I	2373	2444	2561	2680
Communication Equipment Technician II	2637	2716	2851	2988
Communication Equipment Technician III	2786	2870	2954	
Court Reporter	2153	2218	2321	2422
Data Processing Assistant	1495	1540	1592	1644
Data Processing Operator	1399	1441	1490	1538
Data Processing Operator Trainee	1324	1364	1401	1441
Drafting Worker	1800	1854	1931	2002
Electronic Equipment Installer/Repairer	1724	1776	1853	1920
Electronic Equipment Installer/Repairer Leadworker	1895	1942	2024	2100
Electronics Technician	2153	2218	2321	2422
Emergency Response Lead Telecommunicator	1895	1942	2024	2100
Emergency Response Telecommunicator	1724	1776	1853	1920
Engineering Technician II	1967	2026	2112	2202
Engineering Technician III	2262	2330	2438	2549
Executive Secretary I	1800	1854	1931	2002
Graphic Arts Designer	2062	2124	2216	2309
Graphic Arts Technician	1895	1942	2024	2100
Industrial Commission Reporter	2262	2330	2438	2549
Industrial Commission Technician	1800	1854	1931	2002
Insurance Analyst I	1660	1710	1774	1843

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Insurance Analyst II	1885	1942	2024	2100
Insurance Analyst Trainee	1546	1592	1647	1705
Intermittent Clerk	8.15	8.39	8.62	8.87
Library Aide I	1360	1401	1441	1490
Library Aide II	1447	1490	1540	1591
Library Aide III	1546	1592	1647	1705
Library Technical Assistant	1724	1776	1853	1920
Licensing Quality Assurance Analyst	1660	1710	1774	1843
Microfilm Laboratory Technician I	1546	1592	1647	1705
Microfilm Laboratory Technician II	1660	1710	1774	1843
Microfilm Operator I	1399	1441	1490	1538
Microfilm Operator II	1495	1540	1592	1644
Microfilm Operator III	1599	1647	1710	1771
Office Aide	1324	1364	1401	1441
Office Assistant	1495	1540	1592	1644
Office Associate	1599	1647	1710	1771
Office Clerk	1399	1441	1490	1538
Office Coordinator	1660	1710	1774	1843
Photographer I	1800	1854	1931	2002
Photographer II	2062	2124	2216	2309
Photographer III	2153	2218	2321	2422
Photographic Technician I	1800	1854	1931	2002
Photographic Technician II	2062	2124	2216	2309
Photographic Technician III	2153	2218	2321	2422
Procurement Representative	1660	1710	1774	1843
Property & Supply Clerk I	1399	1441	1487	1535
Property & Supply Clerk II	1490	1535	1582	1640
Property Tax Examiner	1660	1710	1774	1843
Rehabilitation Case Coordinator I	1546	1592	1647	1705
Rehabilitation Case Coordinator II	1660	1710	1774	1843
Reproduction Service Technician I	1447	1490	1540	1591
Reproduction Service Technician II	1660	1710	1774	1843
Reproduction Service Technician III	1800	1854	1931	2002
Safety Responsibility Analyst I	1660	1710	1774	1843
Safety Responsibility Analyst II	1885	1942	2024	2100
Storekeeper I	1786	1840	1909	1986
Storekeeper II	1938	1996	2081	2162
Stores Clerk	1444	1487	1535	1581
Switchboard Operator I	1399	1441	1490	1538
Switchboard Operator II	1495	1540	1592	1644
Tax Examiner	1660	1710	1774	1843
Tax Examiner Trainee	1495	1540	1592	1644
Taxpayer Service Representative I	1495	1540	1592	1644
Taxpayer Service Representative II	1660	1710	1774	1843
Taxpayer Service Representative III	1885	1942	2024	2100
Telecommunications Field Advisor	2153	2218	2321	2422
Telecommunications Advisor Lead Worker	2373	2444	2561	2680

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

Telecommunicator 1885 1942 2024 2100
 Telecommunicator-Command Center 1967 2026 2112 2202
 Telecommunicator Lead Worker 2062 2124 2216 2309
 Telecommunicator Lead Worker-Command Center 2153 2218 2321 2422
 Telecommunicator Trainee 1724 1776 1853 1920
 Vehicle Permit Evaluator 1800 1854 1931 2002
 Veterans Service Officer Associate 1800 1854 1931 2002

S T E P S (cont.)

4	5	6	7
1642	1690	1710	1826
1763	1820	1881	1982
1993	2063	2138	2256
2187	2267	2353	2484
1489	1532	1574	1647
2187	2267	2353	2484
2412	2504	2601	2751
1700	1753	1810	1901
1909	1981	2049	2155
1993	2063	2138	2256
1909	1981	2049	2155
1909	1981	2049	2155
2792	2906	3024	3204
3126	3258	3395	3600
3305	3447	3589	3809
2521	2624	2722	2884
1700	1753	1810	1901
1582	1635	1680	1766
1489	1532	1574	1647
2084	2161	2235	2360
1993	2063	2138	2256
1993	2063	2138	2256
2187	2267	2353	2484
2521	2624	2722	2884
2187	2267	2353	2484
1993	2063	2138	2256
2291	2378	2469	2609
2655	2766	2877	3047
2084	2161	2235	2360
2412	2504	2601	2751
2187	2267	2353	2484
2655	2766	2877	3047
2084	2161	2235	2360
1909	1981	2049	2155
2187	2267	2353	2484
1763	1820	1881	1982
9.16	9.43	9.69	10.14
1535	1578	1623	1701

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

1642	1690	1740	1826
1763	1820	1881	1982
1993	2063	2138	2256
1909	1981	2049	2155
1763	1820	1881	1982
1909	1981	2049	2155
1582	1635	1680	1766
1700	1753	1810	1901
1838	1897	1962	2066
1489	1532	1574	1647
1700	1753	1810	1901
1838	1897	1962	2066
1582	1635	1680	1766
1909	1981	2049	2155
2084	2161	2235	2360
2412	2504	2601	2751
2521	2624	2722	2884
2084	2161	2235	2360
2412	2504	2601	2751
2521	2624	2722	2884
1909	1981	2049	2155
1580	1623	1674	1760
1689	1740	1795	1882
1909	1981	2049	2155
1763	1820	1881	1982
1909	1981	2049	2155
1642	1690	1740	1826
1909	1981	2049	2155
2084	2161	2235	2360
1909	1981	2049	2155
2187	2267	2353	2484
2055	2137	2206	2324
2250	2334	2412	2549
1632	1683	1731	1818
1582	1635	1680	1766
1700	1753	1810	1901
1909	1981	2049	2155
1700	1753	1810	1901
1909	1981	2049	2155
2187	2267	2353	2484
2521	2624	2722	2884
2792	2906	3024	3204
2187	2267	2353	2484
2291	2378	2469	2609
2412	2504	2601	2751
2521	2624	2722	2884
1993	2063	2138	2256

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

2084 2161 2235 2360
2084 2161 2235 2360

Effective: November 1, 1994

1a 1/ 1 2 3

Telecommunicator Call Taker 1967 2026 2112 2202
Telecommunicator Lead Call Taker 2153 2218 2321 2422

S T E P S (cont.)

4 5 6 7
2291 2378 2469 2609
2521 2624 2722 2884

1/ Entry level step in first year of contract.

Effective July 1, 1995

S T E P S

1b 2/	1a	1	2	3
Account Clerk I	1447	1490	1535	1586
Account Clerk II	1546	1592	1640	1696
Account Technician I	1724	1776	1829	1909
Account Technician II	1885	1942	2000	2085
Administrative Services Worker Trainee	1324	1364	1405	1443
Aircraft Dispatcher	1885	1942	2000	2085
Aircraft Lead Dispatcher	2062	2124	2188	2282
Audio Visual Technician I	1495	1540	1586	1640
Audio Visual Technician II	1660	1710	1761	1827
Buyer Assistant	1724	1776	1829	1909
Check Issuance Machine Operator	1660	1710	1761	1827
Clerical Trainee	TR			
Communication Dispatcher	1660	1710	1761	1827
Communication Equipment Technician I	2373	2444	2517	2638
Communication Equipment Technician II	2637	2716	2797	2940
Communication Equipment Technician III	2786	2870	2956	3104
Court Reporter	2153	2218	2285	2391
Data Processing Assistant	1495	1540	1586	1640
Data Processing Operator	1399	1441	1484	1535
Data Processing Operator Trainee	1324	1364	1405	1443
Drafting Worker	1800	1854	1910	1989
Electronic Equipment Installer/	1724	1776	1829	1909

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

Repairer	1885	1942	2000	2085	2163
Electronic Equipment Installer/Repairer Leadworker	2153	2218	2285	2391	2495
Electronics Technician	1885	1942	2000	2085	2163
Emergency Response Lead Telecommunicator	1724	1776	1829	1909	1978
Emergency Response Telecommunicator	1967	2026	2087	2175	2268
Engineering Technician II	2262	2330	2400	2511	2625
Engineering Technician III	1800	1854	1910	1989	2062
Executive Secretary I	2062	2124	2188	2282	2378
Graphic Arts Designer	1885	1942	2000	2085	2163
Graphic Arts Technician	2262	2330	2400	2511	2625
Industrial Commission Reporter	1800	1854	1910	1989	2062
Industrial Commission Technician	1660	1710	1761	1827	1898
Insurance Analyst I	1885	1942	2000	2085	2163
Insurance Analyst II	1546	1592	1640	1696	1756
Insurance Analyst Trainee	8.15	8.39	8.65	8.88	9.13
Intermittent Clerk	1360	1401	1443	1484	1535
Library Aide I	1447	1490	1535	1586	1639
Library Aide II	1724	1776	1829	1909	1978
Library Technical Assistant	1546	1592	1640	1696	1756
Microfilm Laboratory Technician I	1660	1710	1761	1827	1898
Microfilm Laboratory Technician II	1399	1441	1484	1535	1584
Microfilm Operator I	1495	1540	1586	1640	1693
Microfilm Operator II	1599	1647	1696	1761	1824
Microfilm Operator III	1324	1364	1405	1443	1484
Office Aide	1495	1540	1586	1640	1693
Office Assistant	1599	1647	1696	1761	1824
Office Associate	1399	1441	1484	1535	1584
Office Clerk	1660	1710	1761	1827	1898
Office Coordinator	1800	1854	1910	1989	2062
Photographer I	2062	2124	2188	2282	2378
Photographer II	2153	2218	2285	2391	2495
Photographer III	1800	1854	1910	1989	2062
Photographic Technician I	2062	2124	2188	2282	2378
Photographic Technician II	2153	2218	2285	2391	2495
Photographic Technician III	1660	1710	1761	1827	1898
Procurement Representative	1399	1441	1484	1532	1581
Property & Supply Clerk I	1490	1535	1581	1629	1689
Property & Supply Clerk II	1660	1710	1761	1827	1898
Property Tax Examiner	1546	1592	1640	1696	1756
Rehabilitation Case Coordinator I	1660	1710	1761	1827	1898
Rehabilitation Case Coordinator II	1447	1490	1535	1586	1639
Reproduction Service Technician I	1660	1710	1761	1827	1898
Reproduction Service Technician II	1800	1854	1910	1989	2062
Reproduction Service Technician III	1885	1942	2000	2085	2163
Safety Responsibility Analyst	1786	1840	1895	1966	2046
Storekeeper I					

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

Storekeeper II	1938	1996	2056	2143	2227
Stores Clerk	1444	1487	1532	1581	1628
Switchboard Operator I	1399	1441	1484	1535	1584
Switchboard Operator II	1495	1540	1586	1640	1693
Telecommunications Field Advisor	2153	2218	2285	2391	2495
Telecommunications Advisor Lead Worker	2373	2444	2517	2638	2760
Telecommunicator	1885	1942	2000	2085	2163
Telecommunicator-Command Center	1967	2026	2087	2175	2268
Telecommunicator Call Taker	1967	2026	2087	2175	2268
Telecommunicator Lead Call Taker	2153	2218	2285	2391	2495
Telecommunicator Lead Worker	2062	2124	2188	2282	2378
Telecommunicator Lead Worker-Command Center	2153	2218	2285	2391	2495
Telecommunicator Trainee	1724	1776	1829	1909	1978
Vehicle Permit Evaluator	1800	1854	1910	1989	2062
Veterans Service Officer Associate	1800	1854	1910	1989	2062

S T E P S (cont.)

4	5	6	7
1691	1741	1792	1881
1816	1875	1937	2041
2053	2125	2202	2324
2253	2335	2424	2559
1534	1578	1621	1696
2253	2335	2424	2559
2484	2579	2679	2834
1751	1806	1864	1958
1966	2040	2110	2220
2053	2125	2202	2324
1966	2040	2110	2220
1966	2040	2110	2220
2876	2993	3115	3300
3220	3356	3497	3708
3404	3550	3697	3923
2597	2703	2804	2971
1751	1806	1864	1958
1629	1684	1730	1819
1534	1578	1621	1696
2147	2226	2302	2431
2053	2125	2202	2324
2253	2335	2424	2559
2597	2703	2804	2971
2253	2335	2424	2559
2053	2125	2202	2324
2360	2449	2543	2687
2735	2849	2963	3138
2147	2226	2302	2431

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

2484	2579	2679	2834
2253	2335	2424	2559
2735	2849	2963	3138
2147	2226	2302	2431
1966	2040	2110	2220
2253	2335	2424	2559
1816	1875	1937	2041
9.44	9.71	9.98	10.44
1581	1625	1672	1758
1691	1741	1792	1881
1816	1875	1937	2041
2053	2125	2202	2324
1966	2040	2110	2220
1816	1875	1937	2041
1966	2040	2110	2220
1629	1684	1730	1819
1751	1806	1864	1958
1893	1954	2021	2128
1534	1578	1621	1696
1751	1806	1864	1958
1893	1954	2021	2128
1629	1684	1730	1819
1966	2040	2110	2220
2147	2226	2302	2431
2484	2579	2679	2834
2597	2703	2804	2971
2147	2226	2302	2431
2484	2579	2679	2834
2597	2703	2804	2971
1966	2040	2110	2220
1627	1672	1724	1813
1740	1792	1849	1938
1966	2040	2110	2220
1816	1875	1937	2041
1966	2040	2110	2220
1691	1741	1792	1881
1966	2040	2110	2220
2147	2226	2302	2431
2253	2335	2424	2559
2117	2201	2272	2394
2318	2404	2484	2625
1681	1733	1783	1873
1629	1684	1730	1819
1751	1806	1864	1958
1966	2040	2110	2220
1751	1806	1864	1958
1751	1806	1864	1958
1966	2040	2110	2220

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

Account Clerk I	1885	1942	2000	2060	2148	2228
Account Clerk II	1447	1490	1535	1591	1634	1688
Account Technician I	1546	1592	1640	1689	1747	1809
Account Technician II	1724	1776	1829	1884	1946	2000
Administrative Services Worker Trainee	1324	1364	1405	1447	1486	1529
Aircraft Dispatcher	1885	1942	2000	2060	2148	2228
Aircraft Lead Dispatcher	2062	2124	2188	2254	2320	2386
Audio Visual Technician I	1495	1540	1586	1634	1689	1744
Audio Visual Technician II	1660	1710	1761	1814	1882	1955
Buyer Assistant	1724	1776	1829	1884	1946	2000
Check Issuance Machine Operator	1660	1710	1761	1814	1882	1955
Clerical Trainee	TR					
Communication Dispatcher	1660	1710	1761	1814	1882	1955
Communication Equipment Technician I	2373	2444	2517	2593	2717	2843
Communication Equipment Technician II	2637	2716	2797	2881	3028	3170
Communication Equipment Technician III	2786	2870	2956	3045	3197	3348
Court Reporter	2153	2218	2285	2354	2463	2570
Data Processing Assistant	1495	1540	1586	1634	1689	1744
Data Processing Operator	1399	1441	1484	1529	1581	1632
Data Processing Operator Trainee	1324	1364	1405	1447	1486	1529
Drafting Worker	1800	1854	1910	1967	2049	2124
Electronic Equipment	1724	1776	1829	1884	1946	2000
Electronic Equipment Installer/Repairer Leadworker	1885	1942	2000	2060	2148	2228
Electronics Technician	2153	2218	2285	2354	2463	2570
Emergency Response Lead	1885	1942	2000	2060	2148	2228

2/ Entry level step in second year of contract.

Effective: July 1, 1996

S T E P S

lc 3/	1b	1a	2	3
Account Clerk I	1447	1490	1535	1591
Account Clerk II	1546	1592	1640	1689
Account Technician I	1724	1776	1829	1884
Account Technician II	1885	1942	2000	2060
Administrative Services Worker Trainee	1324	1364	1405	1447
Aircraft Dispatcher	1885	1942	2000	2060
Aircraft Lead Dispatcher	2062	2124	2188	2254
Audio Visual Technician I	1495	1540	1586	1634
Audio Visual Technician II	1660	1710	1761	1814
Buyer Assistant	1724	1776	1829	1884
Check Issuance Machine Operator	1660	1710	1761	1814
Clerical Trainee	TR			
Communication Dispatcher	1660	1710	1761	1814
Communication Equipment Technician I	2373	2444	2517	2593
Communication Equipment Technician II	2637	2716	2797	2881
Communication Equipment Technician III	2786	2870	2956	3045
Court Reporter	2153	2218	2285	2354
Data Processing Assistant	1495	1540	1586	1634
Data Processing Operator	1399	1441	1484	1529
Data Processing Operator Trainee	1324	1364	1405	1447
Drafting Worker	1800	1854	1910	1967
Electronic Equipment	1724	1776	1829	1884
Electronic Equipment Installer/Repairer Leadworker	1885	1942	2000	2060
Electronics Technician	2153	2218	2285	2354
Emergency Response Lead	1885	1942	2000	2060

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

Telecommunicator	1724	1776	1829	1884	1966	2037
Emergency Response Telecommunicator	1967	2026	2087	2150	2240	2336
Engineering Technician II	2262	2330	2400	2472	2586	2704
Engineering Technician III	1800	1854	1910	1967	2049	2124
Executive Secretary I	2062	2124	2188	2254	2350	2449
Graphic Arts Designer	1885	1942	2000	2060	2148	2228
Graphic Arts Technician	2262	2330	2400	2472	2586	2704
Industrial Commission Reporter	1800	1854	1910	1967	2049	2124
Industrial Commission Technician	1660	1710	1761	1814	1882	1955
Insurance Analyst I	1885	1942	2000	2060	2148	2228
Insurance Analyst II	1546	1592	1640	1689	1747	1809
Insurance Analyst Trainee	8.15	8.39	8.65	8.90	9.14	9.41
Intermittent Clerk	1360	1401	1443	1486	1529	1581
Library Aide I	1447	1490	1535	1581	1634	1688
Library Aide II	1546	1592	1640	1689	1747	1809
Library Aide III	1724	1776	1829	1884	1966	2037
Library Technical Assistant	1546	1592	1640	1689	1747	1809
Microfilm Laboratory Technician I	1660	1710	1761	1814	1882	1955
Microfilm Laboratory Technician II	1399	1441	1484	1529	1581	1632
Microfilm Operator I	1495	1540	1586	1634	1689	1744
Microfilm Operator II	1599	1647	1696	1747	1814	1879
Microfilm Operator III	1324	1364	1405	1447	1486	1529
Office Aide	1495	1540	1586	1634	1689	1744
Office Assistant	1599	1647	1696	1747	1814	1879
Office Associate	1399	1441	1484	1529	1581	1632
Office Clerk	1660	1710	1761	1814	1882	1955
Office Coordinator	1800	1854	1910	1967	2049	2124
Photographer I	2062	2124	2188	2254	2350	2449
Photographer II	2153	2218	2285	2354	2463	2570
Photographer III	1800	1854	1910	1967	2049	2124
Photographic Technician I	2062	2124	2188	2254	2350	2449
Photographic Technician II	2153	2218	2285	2354	2463	2570
Photographic Technician III	1660	1710	1761	1814	1882	1955
Procurement Representative	1399	1441	1484	1529	1578	1628
Property & Supply Clerk I	1490	1535	1581	1628	1678	1740
Property & Supply Clerk II	1660	1710	1761	1814	1882	1955
Property Tax Examiner	1546	1592	1640	1689	1747	1809
Rehabilitation Case Coordinator I	1660	1710	1761	1814	1882	1955
Rehabilitation Case Coordinator II	1447	1490	1535	1581	1634	1688
Reproduction Service Technician I	1660	1710	1761	1814	1882	1955
Reproduction Service Technician II	1800	1854	1910	1967	2049	2124
Reproduction Service Technician III	1885	1942	2000	2060	2148	2228
Safety Responsibility Analyst	1786	1840	1895	1952	2025	2107
Storekeeper I	1938	1996	2056	2118	2207	2294
Storekeeper II	1444	1487	1532	1578	1628	1677
Stores Clerk						

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

Switchboard Operator I	1399	1441	1484	1529	1581	1632
Switchboard Operator II	1495	1540	1586	1634	1689	1744
Telecommunications Field Advisor	2153	2218	2285	2354	2463	2570
Telecommunications Field Advisor	2373	2444	2517	2593	2717	2843
Lead Worker						
Telecommunicator	1885	1942	2000	2060	2148	2228
Telecommunicator-Command Center	1967	2026	2087	2150	2240	2336
Telecommunicator Call						
Taker	1967	2026	2087	2150	2240	2336
Telecommunicator Lead Call						
Taker	2153	2218	2285	2354	2463	2570
Telecommunicator Lead Worker	2062	2124	2188	2254	2350	2449
Telecommunicator Lead	2153	2218	2285	2354	2463	2570
Worker-Command Center						
Telecommunicator Trainee	1724	1776	1829	1884	1966	2037
Vehicle Permit Evaluator	1800	1854	1910	1967	2049	2124
Veterans Service Officer	1800	1854	1910	1967	2049	2124
Associate						

S T E P S (cont.)

4	5	6	7
1742	1793	1846	1937
1870	1931	1995	2102
2115	2189	2268	2394
2321	2405	2497	2636
1580	1625	1670	1747
2321	2405	2497	2636
2559	2656	2759	2919
1804	1860	1920	2017
2025	2101	2173	2287
2115	2189	2268	2394
2025	2101	2173	2287
2025	2101	2173	2287
2962	3083	3208	3399
3317	3457	3602	3819
3506	3657	3808	4041
2675	2784	2888	3060
1804	1860	1920	2017
1678	1735	1782	1874
1580	1625	1670	1747
2211	2293	2371	2504
2115	2189	2268	2394
2321	2405	2497	2636
2675	2784	2888	3060
2115	2189	2268	2394
2321	2405	2497	2636
2115	2189	2268	2394
2431	2522	2619	2768
2817	2934	3052	3232

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

2211	2293	2371	2504
2559	2656	2759	2919
2321	2405	2497	2636
2817	2934	3052	3232
2211	2293	2371	2504
2025	2101	2173	2287
2321	2405	2497	2636
1870	1931	1995	2102
9.72	10.00	10.28	10.75
1628	1674	1722	1811
1742	1793	1846	1937
1870	1931	1995	2102
2115	2189	2268	2394
1870	1931	1995	2102
2025	2101	2173	2287
1678	1735	1782	1874
1804	1860	1920	2017
1950	2013	2082	2192
1580	1625	1670	1747
1804	1860	1920	2017
1950	2013	2082	2192
1678	1735	1782	1874
2025	2101	2173	2287
2211	2293	2371	2504
2559	2656	2759	2919
2675	2784	2888	3060
2211	2293	2371	2504
2559	2656	2759	2919
2675	2784	2888	3060
2025	2101	2173	2287
1676	1722	1776	1867
1792	1846	1904	1996
2025	2101	2173	2287
1870	1931	1995	2102
2025	2101	2173	2287
1742	1793	1846	1937
2025	2101	2173	2287
2211	2293	2371	2504
2321	2405	2497	2636
2181	2267	2340	2466
2388	2476	2559	2704
1731	1785	1836	1929
1678	1735	1782	1874
1804	1860	1920	2017
2025	2101	2173	2287
1804	1860	1920	2017
1804	1860	1920	2017
2025	2101	2173	2287

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

	2321	2405	2497	2636
	2675	2784	2888	3060
	2962	3083	3208	3399
	2321	2405	2497	2636
	2431	2522	2619	2768
	2431	2522	2619	2768
	2675	2784	2888	3060
	2559	2656	2759	2919
	2675	2784	2888	3060
	2115	2189	2268	2394
	2211	2293	2371	2504
	2211	2293	2371	2504

3/ Entry level step in third year of contract.

Effective: August 1, 1996

S T E P S				
1c 3/	1b	1a	1	2
Telecommunicator Lead	2373	2444	2517	2593
Specialist				2717
Telecommunicator Specialist	2153	2218	2285	2354
				2463

S T E P S (cont.)

3	4	5	6	7
2843	2962	3083	3208	3399
2570	2675	2784	2888	3060

Effective: September 16, 1996

S T E P S

1c 3/	1b	1a	1	2
Lottery Telemarketing Representative	1660	1710	1761	1814
				1882

S T E P S (cont.)

3	4	5	6	7
1955	2025	2101	2173	2287

3/ Entry level step in second year of contract.

(Source: Amended at 21 Ill. Reg. **1629**, effective JAN 2 1996)

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: Guidelines for Right-of-Way Acquisitions
- 2) Code Citation: 83 Ill. Adm. Code 300
- 3) Section Numbers: Adopted Action:
300.10 Amendment
300.40 Amendment
300.60 Repeal
Appendix A Amendment
- 4) Statutory Authority: Implementing Sections 8-406, 8-503, 8-509, and 15 401 and authorized by Section 10-101 of the Public Utilities Act* [220 ILCS 5/8-406, 8-503, 8-509, 15-401, and 10-101].
- 5) Effective Date of Amendment: February 1, 1997
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Do these amendments contain incorporations by reference? No
- 8) Date filed in Agency's principal office: January 23, 1997
- 9) Notice of Proposal Published in Illinois Register: June 21, 1996, at 20 Ill. Reg. 8109
- 10) Has Joint Committee on Administrative Rules issued a Statement of Objections to these amendments? No
- 11) Differences between proposal and final version: None
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? No changes required
- 13) Will these amendments replace emergency amendments currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Amendments: On January 1, 1996, Public Act 89-42 became effective, adding Article XV, the Common Carrier by Pipeline Law (Law), to the Public Utilities Act (Act). This addition to the Act moves responsibility for regulation of common carriers by pipeline from the Illinois Commercial Transportation Law to the Act. Section 15-101 of the Law lists certain Sections of the Act that are specifically applicable to common carriers by pipeline. Sections 8-503 and 8-509 of the Act are among those enumerated. The Commission has issued a set of rules for right-of-way acquisitions at 83 Ill. Adm. Code 300. These rules were adopted in 1982 and have never been amended. With the addition of Article

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

XV to the Act, it is appropriate to amend Part 300 to specifically include common carriers by pipeline within its scope. It is also appropriate to update the various statutory citations in the Part and to repeal a Section dealing with the application of the Part to railroads.

16) Information and questions regarding these amendments shall be directed to:

Conrad S. Rubinkowski
Office of General Counsel
Illinois Commerce Commission
527 East Capitol Avenue
P.O. Box 19280
Springfield, IL 62794-9280

The full text of the Adopted Amendments begins on the next page:

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

TITLE 83: PUBLIC UTILITIES
CHAPTER I: ILLINOIS COMMERCE COMMISSION
SUBCHAPTER b: PROVISIONS APPLICABLE TO
MORE THAN ONE KIND OF UTILITY

PART 300
GUIDELINES FOR RIGHT-OF-WAY ACQUISITIONS
(GENERAL ORDER 226)

Section

300.10	Certificate of Public Convenience and Necessity
300.20	Informational Packet
300.30	Negotiation of the Acquisition of a Land Right-of-Way Easement
300.40	Application of this Part
300.50	Revocation of Existing Certificate
300.60	Railroad Company (Repealed)
300.70	Variance

APPENDIX A

Statement of Information from the Illinois Commerce Commission
Concerning Acquisition of Rights-of-Way by Illinois Utilities

AUTHORITY: Implementing Sections 8-406, 8-503, 8-509, and 15-401 and authorized by Section 10-101 of the Public Utilities Act [220 ILCS 5/8-406, 8-503, 8-509, 15-401, and 10-101].

SOURCE: Adopted at 7 Ill. Reg. 339, effective December 23, 1982; codified at 8 Ill. Reg. 12182; amended at 21 Ill. Reg. **1659**, effective February 1, 1997.

Section 300.10 Certificate of Public Convenience and Necessity

a) This Part shall apply whenever Whenever any public utility or common carrier by pipeline seeks to negotiate the acquisition of a land right-of-way easement involving a project which requires a certificate of public convenience and necessity under Section 8-406 or 15-401 55 of the ~~Illinois~~ Public Utilities Act (Act) [220 ILCS 5/8-406 and 15-401] ~~(Ill.-Rev.-Stat.-1981-ch.-111-2/3-par.-56)~~ or whenever a public utility or a common carrier by pipeline seeks an order under Section 8-503 50 of the ~~said~~ Act [220 ILCS 5/8-503] ~~Stat.-1981-ch.-111-2/3-par.-5077-this-Part-shall-apply.~~

b) Requirements in this Part for proceedings involving public utilities are equally applicable to common carriers by pipeline.

(Source: Amended at 21 Ill. Reg. **1659**, effective February 1, 1997)

Section 300.40 Application of this Part

This Part shall be prospectively applied. The Part shall not affect the

ILLINOIS COMMERCE COMMISSION

NOTICE OF ADOPTED AMENDMENTS

following:

- a) The validity of any existing Commission certificate.
 b) The validity of any easement or subsequent order Order of the Commission under Section 8-503.50 of the Illinois Public Utilities Act (~~Ill. Rev. Stat., ch. 111-2/3, par. 507~~).

(Source: Amended at 21 Ill. Reg. 1659, effective 1-1-40.)

Section 300.60 Railroad Company (Repealed)

~~This Part shall not apply to a railroad company seeking to exercise the power of eminent domain under Section 17 of the Van Act to provide for the incorporation of associations that may be organized for the purpose of constructing railways, maintaining and operating the same, for prescribing and defining the duties and limiting the powers of such corporations when so organized, and authorizing the same and all railroad companies of this state to own and hold the stock and securities of railroad companies of other states owning connecting lines.~~ (~~Ill. Rev. Stat., 1901, ch. 114, par. 187~~).

(Source: Repealed at 21 Ill. Reg. 1659, effective 1-1-40.)

ILLINOIS COMMERCE COMMISSION

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Section 300. APPENDIX A Statement of Information from the Illinois Commerce Commission Concerning Acquisition of Rights-of-Way by Illinois Utilities

A representative of a public utility is contacting you for the purpose of negotiating with you concerning the acquisition of a land right-of-way for utility purposes over property which you own or in which you have an interest as an owner. This right-of-way is proposed to be used for the purpose of constructing, operating and maintaining certain facilities of the utility on your land, as set forth in the accompanying letter. This project will be further explained in detail to you by the utility representative who meets with you concerning this proposal.

The purpose of this Statement is to provide you with general information concerning the initial procedures involved. This Statement covers several questions commonly asked of the Illinois Commerce Commission staff by landowners.

This Statement is not a legal opinion concerning your rights under the law or the rules and regulations of the Commission nor is it a detailed analysis of the procedures involved. If you have any questions concerning your legal rights, you may wish to consult an attorney.

Ordinarily, a public utility must obtain a Certificate of Public Convenience and Necessity from the Illinois Commerce Commission under Section 8-406.55 of the ~~Illinois~~ Public Utilities Act [220 ILCS 5/8-406] (~~Ill. Rev. Stat., 1901, ch. 111-2/3, par. 567~~) before constructing major new facilities. An order pursuant to Section 8-406.55 allows a utility to begin construction on land which it owns or on which it has acquired an easement. The utility files its application with this Commission for the Certificate, and the Commission then notifies the property owners involved of the date, time and place of the public hearing to be held by the Commission on the utility's application. Landowners may participate in the hearing(s), either through oral or written statements, or formal intervention as provided in the Commission's Rules of Practice (83 Ill. Adm. Code 200). During such hearing(s), the Commission considers the public need for the proposed project, the type of facilities to be constructed and the feasibility of the proposed location of the facilities. If the Commission finds that the proposed facility is reasonably needed to provide utility service to the public and approves of its design and location, the Commission will grant a Certificate of Public Convenience and Necessity to the utility for the construction of the facilities.

A utility may choose to seek to acquire land or land rights from landowners prior to seeking a Certificate from the Commission. The utility may also seek to obtain an option to purchase a right-of-way from a landowner. The securing of an option does not obligate the utility to purchase the right-of-way. During the negotiations, you may be represented by an attorney. However, you are under no obligation to retain anyone to negotiate on your behalf.

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Negotiation means discussion and bargaining between the landowner and the utility in an effort to arrive at an equitable agreement concerning the land or land rights and the price to be paid for such land or land rights. It does not mean that an agreement must be reached or that either the landowner or the utility must agree with the other. The Commission does not require the utility to obtain by negotiation any fixed amount or percentage of the right-of-way required for the project prior to its applying for a Certificate.

The price to be paid to the landowner by the utility for the land or land rights is a matter of negotiation between the landowner and the utility. The Commission does not participate in the negotiations nor does it establish or approve the price. Specific information on the price to be offered for the land or land rights will be provided by the utility representative.

The utility representative may be negotiating with you for the acquisition of an easement for the use of the land or for the purchase of the land. In either case, the utility will have its own form of easement or deed, as the Commission has no standard forms which the utility is required to use.

If the utility is able to obtain a Certificate of Public Convenience and Necessity for the project and has been unable to acquire the necessary land or land rights from all landowners through negotiation, it may apply to the Commission for an order under Section 8-503.50 of the Public Utilities Act [220 ILCS 5/8-503] ~~which~~ ~~the~~ ~~order~~ ~~pursuant~~ ~~to~~ ~~Section~~ ~~50~~ ~~finds~~ ~~that~~ ~~the~~ ~~project~~ ~~is~~ ~~in~~ ~~the~~ ~~public~~ ~~interest~~ ~~and~~ ~~authorizes~~ ~~and~~ ~~directs~~ ~~the~~ ~~project~~ ~~to~~ ~~be~~ ~~built~~. The Commission will notify the interested landowners from whom the utility has not been able to acquire the necessary land or land rights through negotiation, of the date, time and place of the public hearings to be held by the Commission on the utility's application. Such landowners may participate in the hearing(s), either through oral or written statements, or formal intervention as provided in the Commission's Rules of Practice. During such hearing(s), the Commission determines, among other things, whether the utility had made a reasonable attempt to acquire the necessary land or land rights through negotiation with the landowner.

If the Commission grants the utility an order under Section 8-503.50 of the Public Utilities Act ~~which~~ ~~the~~ ~~order~~ ~~pursuant~~ ~~to~~ ~~Section~~ ~~50~~ ~~finds~~ ~~that~~ ~~the~~ ~~project~~ ~~is~~ ~~in~~ ~~the~~ ~~public~~ ~~interest~~ ~~and~~ ~~authorizes~~ ~~and~~ ~~directs~~ ~~the~~ ~~project~~ ~~to~~ ~~be~~ ~~built~~, the utility still has not been able to acquire the necessary land or land rights through negotiation, the utility may then apply to the courts to exercise the right of eminent domain or condemnation under Article VII Chapter-7, "Eminent Domain," of the Code of Civil Procedure [735 ILCS 5/Art. VII] ~~which~~ ~~the~~ ~~order~~ ~~pursuant~~ ~~to~~ ~~Section~~ ~~50~~ ~~finds~~ ~~that~~ ~~the~~ ~~project~~ ~~is~~ ~~in~~ ~~the~~ ~~public~~ ~~interest~~ ~~and~~ ~~authorizes~~ ~~and~~ ~~directs~~ ~~the~~ ~~project~~ ~~to~~ ~~be~~ ~~built~~, to acquire the right-of-way. Eminent domain is simply the power of the State, or those delegated by the State, to take private property for public use upon payment of just compensation as determined by the courts.

There is no certainty that the utility will be allowed to acquire land or land rights through the use of eminent domain. However, you should not delay

ILLINOIS COMMERCE COMMISSION

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in contacting the utility's representative to attempt to negotiate fair compensation for the land or land rights which the utility seeks. The Commission encourages you to negotiate vigorously on your own behalf or to have an attorney do so for you.

If you have any questions about this Statement or the rules and procedures of the Illinois Commerce Commission, please contact the Chief Engineer, Illinois Commerce Commission, 527 East Capitol Avenue, Springfield, Illinois 62706. Any specific questions concerning your individual property should be addressed to the utility representative.

(Source: Amended at 21 Ill. Reg. ~~1650.3~~, effective

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED AMENDMENTS

TITLE 50: INSURANCE

CHAPTER I: DEPARTMENT OF INSURANCE

SUBCHAPTER 1: PROVISIONS APPLICABLE TO ALL COMPANIES

PART 925

ANNUAL AUDITED FINANCIAL REPORT

Section	Authority
925.10	Purpose and Scope
925.20	Definitions
925.30	Filing and Extensions for Filing of Annual Audited Financial Reports
925.40	Contents of Annual Audited Financial Report
925.50	Designation of Accountant
925.60	Qualifications of Accountant
925.70	Consolidated or Combined Audits
925.80	Scope of Audit and Report of Accountant
925.90	Notification of Adverse Financial Condition
925.100	Report on Internal Control
925.110	Accountant's Letter of Qualifications
925.115	Definition, Availability and Maintenance of Accountant Workpapers
925.120	Examinations (Repealed)
925.130	Exemptions
925.140	Severability Provision
925.150	

AUTHORITY: Implementing Sections 132.1 through 132.7, 136, 401, and 402 of the Illinois Insurance Code [215 ILCS 5/132.1 through 132.7, 136, 401, and 402], and Section 2-7 of the Health Maintenance Organization Act [215 ILCS 125/2-7], and Section 2007 of the Limited Health Service Organization Act [215 ILCS 130/2007], and authorized by Section 401 of the Illinois Insurance Code [215 ILCS 5/401].

SOURCE: Filed July 9, 1975, effective July 21, 1975; codified at 7 Ill. Reg. 2359; amended at 11 Ill. Reg. 18204, effective October 26, 1987; amended at 19 Ill. Reg. 12229, effective August 14, 1995; amended at 21 Ill. Reg. 1666, effective JAN 28 1997.

Section 925.60 Designation of Accountant

a) Each insurer required by this Part to file an Annual Audited Financial Report must, within sixty (60) days after becoming subject to such requirement, register with the Director in writing the name and address of the accountant retained to conduct the annual audit set forth in this Part. Insurers not retaining an accountant on the effective date of this Part shall register the name and address of their retained accountant not less than six (6) months before the date when the first audited financial report is to be filed.

b) If an accountant, who was not the accountant for the immediately

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preceding filed Annual Audited Financial Report, is engaged to audit the insurer's financial statements, the insurer shall within thirty (30) days after the date the accountant is engaged notify the Director of this event. The insurer shall obtain a letter from the accountant and file a copy with the Director stating that the accountant is aware of the provisions of the Illinois Insurance Code and/or Health Maintenance Organization Act and/or the Limited Health Service Organization Act and the Rules and Regulations of the insurance regulatory authority of the state of domicile that relate to accounting and financial matters and affirming that the accountant will express its opinion on the financial statements in terms of their conformity to the statutory accounting practices prescribed or otherwise permitted by that insurance regulatory authority, specifying such exceptions as it may believe appropriate.

c) If an accountant who was not the accountant for the immediately preceding filed Annual Audited Financial Report is dismissed or resigns, the insurer shall within five (5) business days notify the Director of this event. The insurer shall also furnish the Director with a separate letter within ten (10) business days of the above notification stating whether in the twenty-four (24) months preceding such event there were any disagreements with the former accountant on any matter of accounting principles or practices, financial statement disclosure, or auditing scope or procedure, which disagreements, if not resolved to the satisfaction of the former accountant, would have caused it to make reference to the subject matter of the disagreement in connection with its opinion. The disagreements required to be reported in response to this subsection include both those resolved to the former accountant's satisfaction and those not resolved to the former accountant's satisfaction. Disagreements contemplated by this subsection are those that occur at the decisionmaking level, between personnel of the insurer responsible for presentation of its financial statements and personnel of the accounting firm responsible for rendering its report. The insurer shall also in writing request such former accountant to furnish it a letter addressed to the insurer stating whether the accountant agrees with the statements contained in the insurer's letter and, if not, stating the reasons for which it does not agree; and the insurer shall furnish such responsive letter from the former accountant to the Director together with its own.

(Source: Amended at 21 Ill. Reg. 1666, effective JAN 28 1997)

Section 925.140 Exemptions

a) Upon written application of any domestic insurer, the Director may grant an exemption from compliance with this Part if the Director finds, upon review of the application, that compliance with this Part would constitute a financial or organizational hardship upon the

DEPARTMENT OF INSURANCE

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insurer. An exemption may be granted at any time, and from time to time, for a specified period or periods. Within ten (10) days from a denial of an insurer's written request for an exemption from this Part, such insurer may request in writing a hearing on its application for an exemption. Such hearing shall be held in accordance with the Rules of the Illinois Department of Insurance pertaining to administrative hearing procedures (50 Ill. Adm. Code 2402).

b) Foreign and alien insurers having total direct premiums written of less than \$1,000,000 in any calendar year shall be automatically exempt from this Part for such year (unless the Director makes a specific finding that compliance is necessary for the Director to carry out statutory responsibilities) except that insurers having assumed premiums pursuant to contracts and/or treaties of reinsurance of \$1,000,000 or more will not be so exempt.

c) Foreign or alien insurers filing audited financial reports in their state of domicile, pursuant to such domestic state's requirement of audited financial reports which has been found by the Director to be substantially similar to the requirements of this Part, are exempt from this Part if:

1) A copy of the Annual Audited Financial Report, Report on Internal Control, and the Accountant's Letter of Qualifications which are filed with such other state are filed with the Director in accordance with the filing dates specified in Sections 925.40, 925.110 and 925.115 respectively (Canadian insurers may submit accountants' reports as filed with the Canadian Dominion Department of Insurance).

2) A copy of any Notification of Adverse Financial Condition Report filed with such other state is filed with the Director within the time specified in Section 925.100.

(Source: Amended at 21 Ill. Reg. **1688**, effective **JAN 2 1993**)

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED RULES

1) Heading of the Part: Electronic Filing

2) Code Citation: 50 Ill. Adm. Code 4405

3) Section Number: Adopted Action:
4405.10 New Section
4405.20 New Section
4405.30 New Section
4405.40 New Section

4) Statutory Authority: Implementing Section 22-503 and authorized by Section 22-501 of the Illinois Pension Code [40 ILCS 5/22-503 and 22-501.1].

5) Effective Date of Rule: January 28, 1997

6) Does this rule contain an automatic repeal date? No.

7) Does this rule contain incorporations by reference? No.

8) Date filed in Agency's Principal Office: January 28, 1997

9) Notice of Proposal Published in Illinois Register: September 20, 1996, 20 Ill. Reg. 12563

10) Has JCAR issued a Statement of Objections to this rule? No

11) Difference(s) between proposal and final version: Section 4405.10 - On the third and sixth lines, the quotation marks have been deleted. Also the statutory citation found on the last line has been changed from "[40 ILCS 5/22-503]" to "[see 40 ILCS 5/22-503]".

12) Have all changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

13) Will this rule replace an emergency rule currently in effect? No

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of rulemaking: The Pension Division of the Illinois Department of Insurance is charged with formulating and collecting annual reports from the pension and retirement systems of over 566 suburban and downstate police and fire pension funds, as well as Cook County and other large statewide retirement systems that fall within the scope of the Illinois Pension Code. In order to increase the efficiency and use of the information provided in the annual report, electronic filing is being implemented. This filing system will allow easier access to information and will decrease costs in processing, which will allow for a voluminous

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED RULES

reduction in the amount of paper being handled by both the Department and pension funds, and as a result will provide a faster, more accurate means of verifying data. In addition, electronic filing allows the data to be preserved and presented in a form that is usable for comparison and analysis.

- 16) Information and questions regarding this adopted rule shall be directed to:

Tom Jones
Deputy Director, Public Pension Division
Department of Insurance
320 West Washington
Springfield, Illinois 62767-0001
(217) 782-7542

The full text of the Adopted Rule begins on the next page.

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED RULES

TITLE 50: INSURANCE
CHAPTER I: DEPARTMENT OF INSURANCE
SUBCHAPTER aaa: PENSIONS

PART 4405
ELECTRONIC FILING

Section
4405.10 Authority
4405.20 Purpose and Scope
4405.30 Electronic Filing
4405.40 Procedure

AUTHORITY: Implementing Section 22-503 and authorized by Section 22-501.1 of the Illinois Pension Code [40 ILCS 5/22-503 and 22-501.1].

SOURCE: Adopted at 21 Ill. Reg. 1671, effective

JAN 2 8 1993

Section 4405.10 Authority

This Part is promulgated by the Director of Insurance of the State of Illinois pursuant to Section 22-501.1 of the Illinois Pension Code which empowers the Director to *...make reasonable rules and regulations...as may be necessary for making effective and implementing the provisions of the Pension Code...* [40 ILCS 5/22-501.1]. Further authority is granted through the Division's requirement of accepting annual reports from all pension funds (see 40 ILCS 5/22-503).

Section 4405.20 Purpose and Scope

The purpose of this Part is to establish mandatory electronic filing of annual statements to the Pension Division of the Illinois Department of Insurance.

This Part shall apply to all pensions, annuity or retirement funds or systems, which are not financed in whole or part by the State of Illinois.

Section 4405.30 Electronic Filing

All pension, annuity or retirement funds or systems within the scope of this Part shall file their annual statement electronically with the Pension Division of the Illinois Department of Insurance. For purposes of this Part, electronic filing shall mean the transmittal of information over computer lines, with the use of a modem/facsimile, directly into the computer data base of the Department of Insurance.

Section 4405.40 Procedure

DEPARTMENT OF INSURANCE

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- a) Each fund shall be responsible for ensuring effective delivery of its annual report through the electronic filing system.
- b) The perimeters and the substance of the annual statement report shall be furnished to each pension annuity and retirement fund or system by the Department at least 60 days prior to the deadline date for submission.

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NOTICE OF ADOPTED RULE

- 1) Heading of Part: Examination and Audit Procedure
- 2) Code Citation: 50 Ill. Adm. Code 4401
- 3) Section Number:
 4401.10 Adopted
 4401.20 Adopted
 4401.30 Adopted
 4401.40 Adopted
 4401.50 Adopted
 4401.60 Adopted
 4401.70 Adopted
- 4) Statutory Authority: Implementing Section 22-502 and authorized by Section 22-501.1 of the Illinois Pension Code [40 ILCS 5/22-501.1 and 22-502].
- 5) Effective Date of the Rule: January 28, 1997
- 6) Does this rule contain an automatic repeal date? No
- 7) Does this rule contain incorporations by reference? No
- 8) Date filed in Agency's Principal Office: January 28, 1997
- 9) Notice of Proposal Published in Illinois Register: October 4, 1996, 20 Ill. Reg. 12977
- 10) Has JCAR issued a Statement of Objections to this rule? No
- 11) Difference(s) between proposal and final version:
- a) In the heading change "fff" to "aaa".
 - b) Section 4401.30(d) after the last sentence add "One extension of time shall be granted automatically for a period of up to 30 days. Thereafter, requests for extension shall only be granted for good cause".
 - c) Section 4401.40(a) after "circumstances" add "(such as the need to expeditiously focus on a single issue that has been brought to the attention of the Department, or an examination of a small fund, where the cost and time used to travel to the site is excessive in comparison to the time spent and information actually obtained.)".
 - d) Section 4401.70(a)(3) add before the period "pursuant to 40 ILCS 5/22-503."

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED RULE

- e) Section 4401.70(b) after "assessed" add "pursuant to 40 ILCS 5/22-509".

- 12) Have all changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

- 13) Will this rule replace an emergency rule currently in effect? No

- 14) Are there any amendments pending on this Part? No

- 15) Summary and Purpose of rulemaking: Part 4401 will clarify the uniform procedures established for examinations, compliance with examinations, hearings and other matters related to examinations and audits.

- 16) Information and questions regarding this adopted rule shall be directed to:

Michael Blankenship
Department of Insurance
320 West Washington
Springfield, IL 62767-0001
(217)-785-7542

The full text of the Adopted Rule begins on the next page.

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED RULE

TITLE 50: INSURANCE
CHAPTER I: DEPARTMENT OF INSURANCE
SUBCHAPTER aaa: PENSIONS

PART 4401
EXAMINATION AND AUDIT PROCEDURE

Section	Purpose
4401.10	Applicability
4401.20	Pre-Audit and Examination Procedures
4401.30	Audit and Examination
4401.40	Post-Audit and Examination Procedures
4401.50	Audit and Examination Hearings
4401.60	Compliance
4401.70	

AUTHORITY: Implementing Section 22-502 and authorized by Section 22-501.1 of the Illinois Pension Code [40 ILCS 5/22-501.1 and 22-502].

SOURCE: Adopted at 21 Ill. Reg. 1675 effective

JAN 25 1997

Section 4401.10 Purpose

The purpose of this Part is to establish uniform procedures for examination, compliance with examination, hearings and other matters related to examinations and audits.

Section 4401.20 Applicability

This Part shall apply to Article Three (Police-Pension-Fund---Municipalities 507000-and-Under) and 4 (Firefighters-Pension---Municipalities---5007000 and-Under) pension, annuity or retirement funds or systems under the regulatory authority of the Department of Insurance, which are not financed in whole or in part by funds of the State of Illinois, pursuant to Section 22-501 of the Illinois Pension Code [40 ILCS 5/22-501].

Section 4401.30 Pre-Audit and Examination Procedures

- Pursuant to Section 22-502 of the Pension Code [40 ILCS 5/22-502], each pension fund or retirement system under the Illinois Pension Code shall be subject to periodic examinations or audits on behalf of the Illinois Department of Insurance.
- Notification of an impending examination or audit will be given through the issuance of a "Warrant of Examiners." This Warrant of Examiners shall state the name of the pension fund or retirement system which will be examined, and will identify the examiner appointed to perform the examination or audit.

DEPARTMENT OF INSURANCE

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- c) The Warrant of Examiners may also be accompanied by a letter, which shall set a tentative date for a review of the books and other documentation, as well as a request for materials which are to be sent by the pension fund or retirement system to the attention of the examiner within 14 days after receipt of said letter. In preparing for the examination or audit, the Department of Insurance examiner shall have access to all books, records, files, documents and other relevant materials deemed necessary by the Department of Insurance to assist in the completion of such examination or audit.
- d) All requests for an extension of time in providing the requested documents shall be sent to the examiner listed in the warrant at least seven business days before the scheduled deadline. One extension of time shall be granted automatically for a period of up to 30 days. Thereafter, requests for extension shall only be granted for good cause.

Section 4401.40 Audit and Examination

- a) All audits and examinations, except under special circumstances (such as the need to expeditiously focus on a single issue, that has been brought to the attention of the Department, or an examination of a small fund, where the cost and time used to travel to the site is excessive in comparison to the time spent and information actually obtained), shall be made on site, to insure that all books, documents and other relevant procedures can be made readily available to the examiner. During the audit or examination, the examiner may look at all aspects of the pension fund's or retirement system's business. This includes verification of the existence of administrative rules, policies and procedures, verification of the participants in the fund and all information related to the participants, business affairs and expenditures of the pension board, including pension payments and investment holdings and procedures, the appointment and election of trustees, as well as any other relevant issues or procedures.
- b) Desk audits will be performed for each fund, following the timely submission of the annual statement filing. In addition, desk audits may be performed at any time on a pension fund.
- c) Situations may arise which require the Department to perform special examinations. These examinations are limited to specific areas of concern by the Department. The authority of the examiner when conducting a special examination shall be the same authority which is granted to the examiner in the performance of a general or full examination or audit.
- d) The majority of the audits and examinations will be performed directly by members of the Department of Insurance-Pension Division's staff. However, in the event that an outside auditor or examiner is hired, such person shall be given all the rights and powers held by an employee of the Department of Insurance.

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED RULE

Section 4401.50 Post-Audit and Examination Procedures

- a) Following an examination or audit, the examiner may request further information be provided by the pension fund or retirement system. Such information shall be provided within two weeks or within the time frame agreed to by the pension fund or retirement system and the Department of Insurance. At any time, the Pension Division may refer investigatory information to the Illinois Attorney General's Office.
- b) Once all relevant information has been received and reviewed, the examiner will prepare a written report detailing the status of the pension fund's or retirement system's compliance with the policies, procedures and laws applicable to it. This report shall be known as the report of examination. A copy of the report of examination will be sent to the secretary of the pension fund or retirement system. The fund will then have 30 days after the date of receipt of the report to review it and make any request for a hearing based on the facts contained in the examination report.
- c) After 30 days, if no hearing is requested, the examination report shall be officially filed with the Department of Insurance and the contents shall thereafter be considered public information. At this time an order shall be entered by the Director of Insurance which requires compliance where it is determined that the pension fund or retirement system has violated the policies, procedures and laws of the State of Illinois. In response, action must be taken to comply with the findings of the examination report as detailed in the order or within 15 business days, whichever period is shorter.

Section 4401.60 Audit and Examination Hearings

- a) Hearings requested pursuant to this Part are limited to the accuracy of the facts contained in the report of examination.
- b) All requests for a hearing shall be made in writing and delivered to the Pension Division of the Illinois Department of Insurance. Such request shall be received within 30 days after the day that the pension fund or retirement system received the report of examination. Such requests shall identify the specific findings that are in dispute.
- c) Once a timely request is received by the Department, the Department will issue a notice of hearing. All hearings will be scheduled to be held no sooner than 20 days, but no later than 30 days, after receipt of the request, and will be held in the offices of the Department of Insurance.
- d) All hearings will be conducted in accordance with Illinois Administrative Hearing Procedures as outlined in 50 Ill. Adm. Code 2402.

Section 4401.70 Compliance

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED RULE

- a) The findings of the Director of Insurance will be made public in a written order following the hearing. The findings will indicate whether or not an order of compliance is necessary. The order of compliance may be made part of the Director's final order in the hearing. Compliance with this order shall be performed within the time frame specified in the order; however, the time frame should not exceed 15 business days following the entrance of the order.

1) The Director of Insurance may, at his/her discretion, give written notice to the governing body, officer or official of the pension fund or retirement system of specific matters or issues wherein non-compliance is alleged.

2) If the Director of Insurance does not receive evidence that compliance has been achieved within the 15 days following receipt of the notice, then an order to show cause shall be issued to the governing body, officer or official.

3) The Order to Show Cause shall be accompanied by a Notice of Hearing, setting forth a hearing date. The Director of Insurance shall issue an order of his/her findings. If noncompliance continues, orders may be issued and fines may be assessed pursuant to 40 ILCS 5/22-503.

4) Compliance and evidence thereof should be delivered to the Director of Insurance within 30 days after the entrance of the order, unless the pension fund or retirement system has initiated an action for administrative review.

5) If the pension fund or retirement system is unable to meet the deadline for compliance, then the governing body, officer or official should send a certified statement to the Director of Insurance which sets forth the steps to be taken to insure full compliance and the expected day of full compliance.

b) If no action is taken to comply with the Director's Order and no action for administrative review is timely initiated, then the Director of Insurance may assess a civil penalty against the governing body, officer or official of the pension fund or retirement system. A civil penalty may also be assessed pursuant to 40 ILCS 5/22-509 if full compliance with the Director's Order is not achieved as stated within the time frame specified in the certified statement of the governing body, officer or official. This fine shall be \$50 for each day in which the entity continues to be out of compliance, beyond the 30 day time period allowed. In no event shall the amount of such civil penalty exceed \$1,000 per compliance issue.

c) All fines not paid within 30 days after the assessment may, at the Director of Insurance's discretion, be turned over to the Illinois Attorney General with a request for judicial action for compliance and satisfaction.

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED REPEALER

- 1) Heading of the Part: Extension of Service to Additional Counties
- 2) Code Citation: 50 Ill. Adm. Code 5602
- 3) Section Numbers: Adopted Action:
5602.10 Repealed
- 4) Statutory Authority: Implementing and authorized by the Medical Service Plan Act (Ill. Rev. Stat. 1981, ch. 32, pars. 563 et seq., as repealed by P.A. 86-600, effective September 1, 1989).
- 5) Effective Date of Repealer: January 28, 1997
- 6) Does this repealer contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) Date Filed in Agency's Principal Office: January 28, 1997
- 9) Notice of Proposal Published in Illinois Register: August 23, 1996, 20 Ill. Reg. 11437
- 10) Has JCAR issued a Statement of Objections to these rules? No
- 11) Difference(s) between proposal and final version: No changes have been made between the proposed version and the final version.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? No agreements were made between JCAR and the Department during the Second Notice period.
- 13) Will this rulemaking replace an emergency rule currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Rulemaking: In an effort to keep the Department's Administrative Code current and to allow for future expansion, the Department has been doing a number of recodifications. During routine housekeeping, the Department discovered that Part 5602 which implemented Section 563 of the Medical Service Plan Act had been repealed by P.A. 86-600, effective September 1, 1989. It therefore is no longer necessary and is being repealed.
- 16) Information and questions regarding this adopted repealer shall be directed to:

Mary Meyer
Department of Insurance

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED REPEALER

320 West Washington
Springfield, IL 62767-0001
217/785-8220

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED REPEALER

- 1) Heading of the Part: Pension and Examination Procedure
- 2) Code Citation: 50 Ill. Adm. Code 6301
- 3) Section Numbers:

6301.10	Repealed
6301.20	Repealed
6301.30	Repealed
6301.40	Repealed
EXHIBIT A-1	Repealed
EXHIBIT A-2	Repealed
EXHIBIT A-3	Repealed
EXHIBIT A-4	Repealed
- 4) Statutory Authority: Implementing and authorized by Section 22-501.1 of the Illinois Pension Code (Ill. Rev. Stat. 1981, ch. 108 1/2, par. 22.501.1).
- 5) Effective Date of Rulemaking: January 28, 1997
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) Date Filed in Agency's Principal Office: January 28, 1997
- 9) Notice of Proposal Published in Illinois Register: October 4, 1996, 20 Ill. Reg. 12983
- 10) Has JCAR issued a Statement of Objections to these rules? No
- 11) Difference(s) between proposal and final version: No changes were made between the proposed version and the final version.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? No agreements were made between JCAR and the Department during the Second Notice period.
- 13) Will this rulemaking replace an emergency rule currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Rulemaking: The Department has determined that several provisions of Part 6301 are obsolete. Therefore, the Department is repealing Part 6301 and replacing it with Part 4401.
- 16) Information and questions regarding this adopted repealer shall be directed to:

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED REPEALER

Michael Blankenship
Department of Insurance
320 West Washington
Springfield, IL 62767-0001
217/782-1779

OFFICE OF BANKS AND REAL ESTATE

NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: Real Estate Appraiser Certification
- 2) Code Citation: 68 Ill. Adm. Code 1455
- 3) Section Number:
1455.80 Adopted Action:
1455.200 New Section
1455.300 Amendment
1455.300 Amendment
- 4) Statutory Authority: Implementing and authorized by Article 2 of the Real Estate License Act of 1983 [225 ILCS 455/Art.2].
- 5) Effective Date of Adopted Amendment: January 27, 1997
- 6) Does this amendment contain an automatic repeal date? No
- 7) Does this amendment contain incorporations by reference? No
- 8) Date Filed in Agency's Principal Office: January 27, 1997
- 9) Date Notice of Proposed Amendments was published in Illinois Register: September 13, 1996, 20 Ill. Reg. 12311
- 10) Has JCAR issued a Statement of Objections to this rule? No
- 11) Differences between proposal and final version: Pursuant to public comment, the Office of Banks and Real Estate modified the rulemaking to clarify and highlight the authority under which the rules are being adopted. Also, language was added to better explain the relationship between the three ranks of appraiser licensure. The only other changes made were technical/formatting changes recommended by JCAR.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? All the changes agreed upon by the Agency and JCAR have been made.
- 13) Will this amendment replace emergency amendments currently in effect? No
- 14) Are there any other proposed amendments pending on this Part? No
- 15) Summary and Purpose of Rules: The proposed rulemaking, recommended by the Illinois Appraisal Committee, makes two changes in the appraiser certification rules intended to streamline investigation, compliance, and renewal activities of the Office of Banks and Real Estate.

Sections 1455.200 and 1455.300 are amended to change the expiration date for continuing education (CE) course approval from March 31 of even numbered years to September 30 of odd numbered years. This change will

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make the two-year approval cycle for CE courses coincide with the two-year license cycle for appraiser licensees, reducing confusion for education providers and appraiser licensees and making it easier for the Office of Banks and Real Estate to monitor licensee compliance with continuing education requirements. The approval period during which the transition to the new expiration date will be made is 18 months long (the normal period is 24 months); approval fees for that one period will be prorated accordingly to 18/24ths of the normal fees.

There are three ranks of licensure for real estate appraisers. New Section 1455.80 will specify that while a person can upgrade or downgrade his or her license, the person may hold only one rank of appraiser licensure at one time. In the event of an upgrade or downgrade, any complaints, sanctions, or other disciplinary matters pertaining to the existing license will transfer to the upgraded or downgraded license. This will facilitate investigative and enforcement actions by the Office of Banks and Real Estate and ensure that supervisory and disciplinary actions are not affected by an upgrade or downgrade.

16) Information and questions regarding these Adopted Amendments shall be directed to:

John Arthur
Legislative Liaison
Office of Banks and Real Estate
500 East Monroe, Suite 900
Springfield, IL 62701
217/782-3000; fax: 217/524-5941

The full text of the Adopted Amendments begins on the next page:

OFFICE OF BANKS AND REAL ESTATE

NOTICE OF ADOPTED AMENDMENTS

TITLE 68: PROFESSIONS AND OCCUPATIONS
CHAPTER VIII: OFFICE OF BANKS AND REAL ESTATE

PART 1455

REAL ESTATE APPRAISER CERTIFICATION

SUBPART A: RESIDENTIAL AND GENERAL CERTIFICATION

Section	
1455.10	Definitions
1455.15	Uniform Standards of Professional Appraisal Practice
1455.16	Jurisdictional Exceptions/Supplemental Standards
1455.20	Education and Experience Requirements for State Licensed Real Estate Appraiser
1455.30	Education and Experience Requirements for Certified Residential and Certified General Real Estate Appraiser
1455.40	Application as a State Licensed Real Estate Appraiser, Certified Residential Real Estate Appraiser or Certified General Real Estate Appraiser
1455.50	Examination
1455.60	Nonresident Licensure/Certification
1455.70	Nonresident/Temporary Practice
1455.80	Upgrade and Downgrade of Appraiser License/Certification

SUBPART B: EDUCATION PROVIDERS

Section	
1455.200	Approval of Education Providers/Courses
1455.205	Appraiser Continuing Education (CE)
1455.210	Fees - Education Providers/Courses (Repealed)

SUBPART C: GENERAL

Section	
1455.300	Renewals
1455.305	Fees
1455.310	Granting Variances

AUTHORITY: Implementing Article 2 of the Real Estate License Act of 1983 [225 ILCS 455/Art. 2] and authorized by Section 60(7) of the Civil Administrative Code of Illinois [20 ILCS 2105/60(7)].

SOURCE: Emergency rules adopted at 16 Ill. Reg. 16196, effective September 30, 1992, for a maximum of 150 days; rules adopted at 17 Ill. Reg. 1589, effective January 26, 1993; emergency amendment at 17 Ill. Reg. 6668, effective April 19, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 13494, effective July 30, 1993; amended at 18 Ill. Reg. 2379, effective January 28, 1994; emergency amendment at 18 Ill. Reg. 3006, effective February 10, 1994,

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for a maximum of 150 days; amended at 18 Ill. Reg. 8428, effective May 24, 1994; amended at 19 Ill. Reg. 9176, effective June 26, 1995; emergency amendment at 19 Ill. Reg. 12503, effective August 16, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 16604, effective December 1, 1995; amended at 20 Ill. Reg. 6488, effective April 30, 1996; recodified from Chapter VII, Department of Professional Regulation, to Chapter VIII, Office of Banks and Real Estate, pursuant to PA 89-23 and PA 89-508, at 20 Ill. Reg. 11984; amended at 21 Ill. Reg. 1685, effective JAN 27 1997.

SUBPART A: RESIDENTIAL AND GENERAL CERTIFICATION

Section 1455.80 Upgrade and Downgrade of Appraiser License/Certification

The three categories of appraiser licensure under Article 2 of the Act are ranked according to the level of education and experience required to qualify for each respective license or certificate. The categories of licensure are ranked, in order from the least amount of education and experience required to the highest amount of education and experience required, as follows: State Licensed Real Estate Appraiser, State Certified Residential Real Estate Appraiser, and State Certified General Real Estate Appraiser.

A State Licensed Real Estate Appraiser, State Certified Residential Real Estate Appraiser, or State Certified General Real Estate Appraiser may apply to upgrade or downgrade his or her license to a higher or lower rank by filing the appropriate application, meeting all license requirements, and paying all fees in effect at the time of application for the higher or lower rank.

- a) Upon the issuance to an appraiser of a license at a higher or lower rank, the term of the appraiser's previously active license, pursuant to Section 36.12 of the Act, shall end.
- b) Any actions by the Office of Banks and Real Estate relating to allegations, complaints, investigations, prosecutions, discipline, supervision, or sanctions pursuant to the Act or this Part that apply to an individual holding an appraiser license shall continue to apply to the individual no matter what rank of appraiser licensure the individual has held, is holding, or may hold in the future.

(Source: Added at 21 Ill. Reg. 1685, effective JAN 27 1997)

SUBPART B: EDUCATION PROVIDERS

Section 1455.200 Approval of Education Providers/Courses

- a) An entity seeking approval as an appraisal education provider shall submit an application, on forms provided by the Office (OBRE), and shall meet the following minimum criteria:
 - 1) The provider shall:
 - A) Maintain a fixed office that is adequate for the maintenance of all records, office equipment, files, telephone equipment

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- B) and office space necessary for customer service; Offer a minimum of one curriculum that conforms to the standards of subsections (c) and (d) of this Section;
- C) Administer a mandatory final examination for each pre-licensure course offering;
- D) Provide each student within 21 days of completion of each course (or within 21 days of a request by a student or OBRE), a certification of completion, transcript or other document verifying hours of attendance, successful course completion and identifying the course by name and number, if any. In addition, such certificate, transcript or other document shall indicate the provider's address and telephone number, the location and date of the course, and include an authorized signature of the course provider's representative. Documentation for CE courses may be in the form of a Uniform Request for Continuing Education, which is a form supplied by national appraisal organizations;
- E) Submit the fee(s) set forth in Section 1455.305;
- F) Comply with all applicable fire, building, zoning, health, safety and accessibility codes and standards pertaining to the premises, equipment and facilities of the course site; Provide the student with information which specifies the course of study to be offered; the tuition to be charged; the school's policy regarding refund of unearned tuition when a student is dismissed or withdraws voluntarily or through hardship; any additional fee to be charged for supplies, materials or books which become the property of the student upon payment; and such other matters as are material to the relationship between the school and the student (e.g., cost of retaking a course, current status of licensure, any disciplinary action taken by OBRE and attendance requirements);
- H) Maintain for each student a record which shall include the course of instruction undertaken, dates of attendance, and areas of study completed satisfactorily. Each student's record shall be maintained by the school for a period of at least 7 years and shall be available for inspection by the student or by OBRE or its designee during regular business hours; and
- I) Employ competent instructors.
 - i) Beginning December 31, 1993, instructors for courses in the IL IV and IL V curricula shall be Certified General Real Estate Appraisers or full time faculty members of a 4-year college or university.
 - ii) Beginning December 31, 1993, instructors for courses in the IL I, IL II and IL III curricula shall be Certified Residential or Certified General Real Estate Appraisers or full time faculty members of a 4-year

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college or university.

iii) For CE courses and courses in the IL E curriculum, instructors should be Certified Residential or General Real Estate Appraisers or persons with education and/or experience in appraisal or the subject matter of the course.

2) Approved course providers shall not advertise as being endorsed, recommended or accredited by OBRE. Course providers may indicate that the provider and course of study have been approved by OBRE.

3) Illinois Colleges, Universities, and Agencies

A) Colleges and universities which apply as appraisal education providers under subsection (a)(1) above shall be accredited by the regional accrediting body and offer either or both an associate's and baccalaureate degree program.

B) Illinois Colleges and universities will not be required to pay the application fees required by Section 1455.305.

C) Agencies under the jurisdiction of the Governor of the State of Illinois will not be required to pay the application fees required for education providers by Section 1455.305.

b) Appraisal Education Sub-Providers

1) Sub-organizations (such as chapters, branch schools and local associations) may seek CE course approval (licensure) under the appraisal education provider's license of the parent organization. Such sub-providers may not seek approval for pre-license appraisal courses. Sub-providers may offer pre-license courses as a co-sponsor with the parent provider.

2) Sub-organizations need not apply to OBRE to become an approved CE course provider but may seek course approval under the providership of the parent organization.

A) A sub-provider need not comply with (A), (C), (D) or (H) of subsection (a)(1) of this Section.

B) The license of the parent organization may not be jeopardized or disciplined as a result of the actions of the sub-provider.

3) The appraisal education sub-provider, on each application for CE course approval, must certify:

A) The sub-organization has reviewed the CE course and approves the course content;

B) The sub-organization is an authorized affiliate of the parent organization;

C) The parent organization has given the sub-organization permission to seek course approval (licensure) under the umbrella of the parent organization's provider's license; or, that the parent organization will recognize the course for CE credit within its own CE program.

4) Each CE course sub-provider shall issue to each registered student a certificate of attendance that shall indicate the student's name, social security number or appraiser

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license/certification number, the date(s) and location of the course, the signature of an authorized representative of the sub-provider and a statement that the student did or did not attend a minimum of 90% of the course. A certificate of attendance may be in the form of a course attendance diploma, a certification letter, an official transcript or a "Uniform Request for Continuing Education Credit".

5) Within twenty-one (21) days after completion of each CE course presentation, the sub-provider shall certify to OBRE a roster of all duly registered students. The certification shall be on forms provided by OBRE and shall include:

A) The CE course license number;

B) The license number of the parent provider;

C) The date(s) and location of the CE presentation;

D) The name of the instructor(s);

E) A listing of students by full name, appraiser license/certification number (or social security number) and an indication that the student did or did not attend a minimum of 90% of the course (the names shall be listed in alphabetical order); and

F) The authorized signature of a representative of the sub-organization.

c) Required Pre-License/Certification Course Curriculum

1) Standards of Professional Appraisal Practice--15 hours (IL I). This course curriculum reviews USPAP adopted by the Appraisal Subcommittee. Topics are:

A) Ethics Provision - USPAP

B) Competency Provision - USPAP

C) Departure Provision - USPAP

D) Standard 1 - USPAP

E) Standard 2 - USPAP

F) Standard 3 - USPAP

G) Standard 4 - USPAP

H) Standard 5 - USPAP

I) Standard 6 - USPAP

2) Basic Principles of Appraisal--30 hours (IL II). This course curriculum shall include an overview of the appraisal process covering the principles of market and valuation analysis necessary for appraising real property and an introduction to appraisal theory, concepts, techniques and the level of competence required to perform professional appraisal analyses. Topics are:

A) Influences on Real Estate

B) Real Estate/Real Property/Personal Property

C) Real Estate Ownership

D) Legal Descriptions

E) Types of Value

F) Economic Principles

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- G) Real Estate Markets and Market Analysis
H) Money and Capital Markets
I) Real Estate Financing
J) Valuation Process
K) Neighborhood Data and Analysis
L) Site Data and Analysis
M) Improvement Data and Analysis
N) Basic Construction and Design
O) Highest and Best Use Analysis
P) Sources of Valuation Data
Q) Accumulation of Valuation Data
R) Overview of the Three Approaches to Value
S) Reconciliation and Final Value Estimate
T) Overview of the Appraisal Report
- 3) Residential Valuation Procedures/Single Family Appraisal--30 hours (IL III). This course curriculum shall be designed to provide an understanding and working knowledge of the procedures and techniques required to estimate the market value of residential properties. Emphasis should be placed on the extraction of data and the correct application of the three approaches to real estate valuation. Topics are:
- A) Basic Statistics
 - B) Residential Site Valuation - Sales Comparison
 - C) Residential Site Valuation - Allocation
 - D) Residential Site Valuation - Extraction
 - E) Cost Approach - Cost New Estimates
 - F) Cost Approach - Entrepreneurial Profit
 - G) Cost Approach - Types of Depreciation
 - H) Cost Approach - Depreciation - Age-Life Method
 - I) Cost Approach - Depreciation - Market Extraction Method
 - J) Cost Approach - Depreciation - Breakdown Method
 - K) Cost Approach - Application
 - L) Sales Comparison Approach - Units of Comparison
 - M) Sales Comparison Approach - Elements of Comparison
 - N) Sales Comparison Approach - Cash Equivalency
 - O) Sales Comparison Approach - Making Adjustments
 - P) Sales Comparison Approach - Application
 - Q) Income Capitalization Approach - Gross Rent Estimates
 - R) Income Capitalization Approach - Gross Rent Multiplier
 - S) Income Capitalization Approach - Application
 - T) Residential Appraisal Reports
- 4) Valuation Procedures, Nonresidential Properties--30 hours (IL IV). This course curriculum focuses on the appraisal of nonresidential properties and provides a practical solution for estimating value by an in-depth study of appraisal theory and the development of advanced valuation skills. Topics are:
- A) Basic Statistics
 - B) Site Valuation - Sales Comparison

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- C) Site Valuation - Allocation/Extraction
 - D) Site Valuation - Subdivision Analysis/Other Methods
 - E) Cost Approach - Cost New Estimates
 - F) Cost Approach - Entrepreneurial Profit
 - G) Cost Approach - Types of Depreciation
 - H) Cost Approach - Depreciation - Age-Life Method
 - I) Cost Approach - Depreciation - Market Extraction Method
 - J) Cost Approach - Depreciation - Breakdown Method
 - K) Cost Approach - Application
 - L) Sales Comparison Approach - Units of Comparison
 - M) Sales Comparison Approach - Elements of Comparison
 - N) Sales Comparison Approach - Cash Equivalency
 - O) Sales Comparison Approach - Making Adjustments
 - P) Sales Comparison Approach - Application
 - Q) Income Approach - Income Estimates
 - R) Income Approach - Expense Estimates
 - S) Income Approach - Capitalization Rates
 - T) Income Approach - Direct Capitalization
 - U) Income Approach - Income Multipliers
 - V) Income Approach - Application
 - W) Appraisal Reports
- 5) Income Capitalization--30 hours (IL V). Courses in this curriculum are to provide alternative methods of estimating present value based on income forecasts. There courses focus on more advanced capitalization methods and techniques. Topics include:
- A) Six Functions of \$1
 - B) Gross Income Estimates
 - C) Vacancy and Collection Loss
 - D) Operating Expense Estimates
 - E) Reserves for Replacement
 - F) Operating Statement Ratios and Multipliers
 - G) Debt Service/Equity Dividend
 - H) Direct Capitalization
 - I) Overall Rate Development - Market Extraction
 - J) Overall Rate Development - Band of Investment
 - K) Overall Rate Development - Ratios/Multipliers
 - L) Overall Rate Development - Residual Techniques
 - M) Equity Dividend Rate
 - N) Debt Coverage Ratio
 - O) Cash Flow Estimates
 - P) Reversion Estimates
 - Q) Discount and Yield Rates
 - R) Yield Capitalization Overview
 - S) Discounted Cash Flow Analysis Overview
 - T) Lease Provisions, Analysis and Valuation
 - U) Lease Analysis
 - V) Partial Interest Valuation

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- 6) Courses in the IL E curriculum (electives) are courses with topics that are considered more advanced; and/or cover appraisal topics not covered in the core course curricula. Credit for elective hours can be achieved by successful completion of courses approved in the IL E curriculum or by successful completion of courses with excess hours approved and allocated for elective credit in accordance with subsection (c)(9) of this Section.
 - 7) Each pre-license/certification course shall be a minimum of 15 credit hours.
 - 8) All pre-license/certification courses shall include a final examination.
 - A) Each final exam for curricula IL II, IL III, IL IV, IL V and IL E (elective) courses shall consist of a minimum of 50 questions; however, courses approved for 15 hours credit may have a final examination with 25 questions.
 - B) The final exam for IL I courses shall consist of a minimum of 25 questions.
 - C) The applicant shall pass the examination in order to obtain credit for a course. A passing score shall be a minimum of 70% of examination questions answered correctly.
 - 9) If 80% of the required topics for IL II through IL V courses are presented, the course shall be approved for the minimum required hours. Two 15 hour courses from a single provider may be approved to meet a 30 hour curriculum requirement, provided the courses together cover a minimum of 80% of the required curriculum topics. An application for one 15 hour course in a curriculum requiring 30 hours will be denied. For courses in the IL I curriculum 100% of the listed topics must be covered. IL E courses will be approved based upon the Committee's review of the course as to the value of topics to be presented and their relationship to the appraisal process.
 - A) Classroom hours in excess of the curriculum requirement may be approved for elective credit. Such approval is limited to 9 excess hours for courses in a 30 hour curriculum requirement and 5 excess hours for courses in a 15 hour curriculum requirement.
 - B) Excess hours may be approved, within the above limits based upon the Committee's evaluation of the appraisal educational value of the excess hours.
 - 10) All changes in course content shall be submitted to OBRE for review and evaluation.
 - 11) The license for all pre-license/certification courses shall expire 36 months from the date of issue. An approved provider may renew the course approval by completing a renewal application and paying the renewal fee, in accordance with Sections 1455.300 and 1455.305 of this Part.
- d) CE Course Requirement

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- 1) Courses licensed by OBRE for pre-license/certification appraisal education are approved for CE credit. The renewal applicant will be awarded credit for attendance at these courses provided the license for the course was valid and in good standing at the time of attendance; and provided the course is not repetitious as indicated by Section 1455.205. CE credit for pre-license/certification education will be awarded as 15 hours for 15 hour courses and 20 hours for 30 (or more) hour courses.
- 2) CE courses shall be approved by the Director, upon the recommendation of the Committee, for courses with or without a final examination.
- 3) The application for each course approval shall include a description of the course, a course (or instructor's) outline that shall list the time frame for topic presentation, the number of classroom instruction hours excluding examination, the time allotted for examination (if any), the specific course name as it will appear on transcripts or course certifications, a sample of the certificate, the transcript or other documentation that will be used to document the student's attendance and any other information that may be required by OBRE.
 - A) An applicant may be required to submit texts and all other course materials for evaluation by the Appraisal Committee.
 - B) The application for CE courses being offered by a sub-provider shall also include a certification in accordance with subsection (b)(3) of this Section.
- 4) The Committee/Director shall approve courses that would contribute to the integrity, extension and enhancement of professional skills and knowledge in the practice of Real Estate Appraisal. Courses submitted for approval should be designed to cover at least one of the following topics:
 - A) Ad Valorem Taxation
 - B) Arbitration
 - C) Business Courses (related to practice of real estate appraisal)
 - D) Construction Cost Estimating
 - E) Ethics and Standards of Professional Practice
 - F) Illinois Appraiser Licensing Laws and/or Rules
 - G) Land Use, Planning, and Zoning
 - H) Property Development
 - I) Real Estate Appraisal (valuation/evaluation)
 - J) Real Estate Management, Leasing, Brokerage, Timeshare
 - K) Real Estate Law
 - L) Real Estate Litigation
 - M) Real Estate Finance or Investment
 - N) Appraisal Computer Applications
 - O) Real Estate Securities and Syndications
 - P) Real Property Exchange
 - Q) Other topics deemed appropriate by the Committee/Director.

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- 5) The Committee/Director shall not approve:
- Motivation courses or seminars
 - Courses that focus instruction to increase appraiser income
 - Courses or seminars that focus on the recruitment of employees or clients
 - Courses or seminars with instructional material relative to associations
 - Courses or seminars with instructional material relative to passing the State's appraiser examination
 - Having less than three classroom hours of instruction exclusive of examination (if any)
 - A course for more than 20 hours CE credit
- 6) Subsequent to approval of any CE course, revisions in course content and/or course material shall be submitted for re-evaluation and re-approval. Failure to report course changes may result in revocation of the CE course license. The fee for re-approval shall be in accordance with Section 1455.305.
- 7) Approval (license) for CE courses shall expire on March 31 of even numbered years until March 31, 1998. Beginning April 1, 1998, approval (license) for CE courses shall expire on September 30 of odd numbered years. The provider or sub-provider may renew the approval (license) by completing a renewal application and paying the renewal fee, in accordance with Sections 1455.300 and 1455.305 of this Part. The approval (license) fee or renewal fee for CE courses expiring on September 30, 1999 shall be \$18/24ths of the approval (license) fee or renewal fee as provided in Section 1455.305 of this Part.

e) Audits and Inspections. OBRE may conduct on site inspections of the course provider's (or sub-provider's) place of business and may audit any session of any course approved for pre-license or CE credit.

- At the request of the Director, a course provider shall provide a list of all courses that the provider is planning to offer within a 6 month period subsequent to the request. The list shall include the name and license number of each course, as well as the date, time and location of each presentation.

2) In the event of a course audit, the provider shall provide OBRE representative, at no cost, any and all course materials used in the presentation of the course being audited.

3) The Director, a member of the Director's staff, an Appraisal committee member or other designated OBRE employee may inspect the business office of any course provider (or sub-provider) during normal business hours.

f) Withdrawal of Approval

- OBRE, upon recommendation of the Real Estate Appraisal Committee, shall withdraw, suspend or place on probation in accordance with 68 Ill. Adm. Code 1110 the approval of the real estate appraiser education provider when the quality of the program fails to continue to meet the established criteria of an approved provider

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as set out in this Section or upon determination that the decision to approve the program was based upon false or deceptive information.

- The provider's license will terminate immediately upon the failure to renew. Course licenses will terminate upon the expiration date or immediately upon the termination of the provider's license. The provider may thereafter reapply for approval as an appraiser education provider and for course approval.

(Source: Amended at 21 Ill. Reg. 1685, effective JAN 27 1997)

SUBPART C: GENERAL

Section 1455.300 Renewals

a) Every license or certificate issued under the Act as a State Licensed Real Estate Appraiser, Certified Residential Real Estate Appraiser or Certified General Real Estate Appraiser shall expire on September 30 of each odd-numbered year, except as provided in Section 1455.80(a). The holder of a license or certification may renew the license or certification during the month preceding the expiration date by paying the required fee specified in Section 1455.305 of this Part.

- In order to renew a license or certification in 1995, and thereafter, an applicant will be required to comply with the continuing education requirements pursuant to Section 36.17 of the Act and Section 1455.205 of this Part.

2) A license with the title of State Licensed Real Estate Appraiser may be renewed by providing evidence of completion of experience as required by Section 1455.20(b), evidence of 20 hours CE course work and payment of renewal fees set forth in Section 1455.305 of this Part. For a license expired between 2 years and 3 years, a renewal applicant shall complete the 20 hours of CE after the expiration date on the license.

3) An expired license for Certified Residential or General Real Estate Appraiser may be renewed by payment of renewal fees set forth in Section 1455.305 of this Part and evidence of completion of 20 hours of CE coursework. For a license expired between 2 years and 3 years, a renewal applicant shall complete 20 hours of CE after the expiration date on the license.

4) A license or certificate for State Licensed, Certified Residential or Certified General Real Estate Appraiser expired for more than 3 years will not be renewed. The appraiser may reapply for license or certification by meeting the licensure or certification requirements in effect at the time of application and by passing the appropriate State Appraiser Examination.

5) The holder of a license or certificate for State Licensed,

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Certified Residential or Certified General Appraiser that is expired for a period of less than 3 years may renew the license or certificate in accordance with the provisions of this Section. Licensees may not reapply for licensure or certification in the same appraiser category until the certificate has been expired for 3 years.

- b) Approved real estate appraiser education providers shall renew December 31 each year by paying the required fee set forth in Section 1455.305 of this Part. An appraiser education provider's license that has expired for more than 60 days may not be renewed. The provider may reapply for licensure in accordance with Section 1455.200.

- c) Approved pre-licensure/certification courses will expire 3 years from the date of issue, or upon the expiration of the provider license (for which the course license is subordinate), and may be renewed by renewal application and payment of fees, in accordance with Sections 1455.200 and 1455.305, 60 days prior to expiration.

- 1) The renewal application shall include a confirmation of the provider's original certification and a certification that the course is essentially the same course as previously approved. In addition to the application, the applicant must explain any course revisions in detail, submit a listing of texts and other materials used in the course as well as the current final examination, and submit the current course outline, which shall contain a time schedule for topic presentation.

- 2) Applications received 366 days or more after the expiration date shall not be renewed. The applicant may submit a new application for approval of the pre-licensure/certification course under a different course title.

- d) Approved appraisal CE courses will expire on March 31 of even numbered years until March 31, 1998 and may be renewed by renewal application and payment of fees, in accordance with Sections 1455.200 and 1455.305, 60 days prior to expiration. Beginning April 1, 1998, approved appraisal CE courses will expire on September 30 of odd numbered years and may be renewed by renewal application and payment of fees, in accordance with Sections 1455.200 and 1455.305, 60 days prior to expiration.

- 1) The renewal application shall include a confirmation of the provider's original certification and a certification that the course is essentially the same course as previously approved. In addition to the application, the applicant must explain any course revisions in detail, submit a listing of texts and other materials used in the course, and submit the current course outline, which shall contain a time schedule for topic presentation.

- 2) Any application for CE course renewal received 366 days or more after the expiration date shall not be renewed. The applicant may submit a new application for approval of the course under a

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different course title.

- 3) A course meeting the requirements of a pre-licensure/certification course as set forth in Section 1455.200(c)(1) through (5) will be denied licensure as a CE course; however, such course may be approved by application for approval as a pre-licensure/certification course and payment of the appropriate fee.

- e) It is the responsibility of each individual holding certification or licensure to notify the Office (OBRE) of any change of address. Failure to receive a renewal form from OBRE shall not constitute an excuse for failure to pay the renewal fee and to renew the certification in a timely manner.

- f) A certificate for State Licensed Real Estate Appraiser will not be renewed until OBRE has received documentation of 500 hours of experience in accordance with Section 1455.20(b). To expedite processing, the documentation may be submitted with the original application for licensure or as soon as the experience is met; otherwise, it shall be submitted with the renewal application.

(Source: Amended at 21 Ill. Reg. 1685, effective

JAN 27 1997)

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- 1) Heading of the Part: Demonstration Programs
- 2) Code Citation: 89 Ill. Adm. Code 170
- 3) Section Numbers: Adopted Action:
170.410 New Section
- 4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/12-13]
- 5) Effective Date of Amendments: January 27, 1997
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Do these Amendments contain incorporations by reference? No
- 8) Date Filed in Agency's Principal Office: January 27, 1997
- 9) Notice of Proposal Published in Illinois Register: April 26, 1996 (20 Ill. Reg. 5977)
- 10) Has JCAR issued a Statement of Objections to these Adopted Amendments?
Yes
- 11) Differences between proposal and final version: The following changes were made in the text of the proposed amendments:
 1. In the Table of Contents and the Section title, "Electronic Fingerprinting" was changed to "Electronic Fingerprinting (AIMS) Demonstration".
 2. All references to "electronic fingerprinting" were changed to "electronic fingerprinting".
 3. All references to "finger-imaging" were changed to "fingerprinting".
 4. In Section 170.410, "statewide" was capitalized and "July 1, 1996" was changed to "December 1, 1996".
 5. In Section 170.410(a)(2), the final semicolon was changed to a colon.
 6. In Section 170.410(a)(2)(B), the final period was changed to a semicolon.
 7. In Section 170.410(b)(1), "they" was changed to "he or she" and all references to "fingerprinted" were changed to "fingerprinted".
 8. In Section 170.410(b)(2), "or both index fingers" was inserted after

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9. Section 170.410(c)(2) was rewritten as follows:
"hands".
 - "In the event of a system failure or prolonged downtime (30 minutes or more), a person who agrees to be fingerprinted shall be considered as having cooperated. The person shall be required to return to the local officer, within a specified period of time, to complete the fingerprinting process when the system is operational. If the individual does not return, within the specified period of time, he or she will be considered as not cooperating."
 10. In Section 170.410(c)(5)(A) and (D), "fingerprinting" was changed to "fingerprinting".
 11. In Section 170.410(d), "they apply" was changed to "he or she applies" and "fingerprint" was changed to "fingerprinting".
 12. In Section 170.410(e)(1), "he or she" was changed to "they" and "his or her" was changed to "their".
 13. In Section 170.410(e)(2)(B), "or cases" was added after "case".
 14. In Section 170.410(e)(3), "appointment" was pluralized.
No other changes have been made in the text of the proposed amendments.
 - 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes
 - 13) Will these Amendments replace Emergency Amendments currently in effect?
No
 - 14) Are there any Amendments pending on this Part? Yes
- | Section Numbers | Proposed Action | Illinois Register Citation |
|-----------------|-----------------|---------------------------------------|
| 170.380 | Amendment | October 25, 1996 (20 Ill. Reg. 13900) |
- 15) Summary and Purpose of Amendments:
These amendments implement provisions of Public Act 88-554 which mandate the Department to implement a demonstration project to determine the cost-effectiveness of preventing multiple case fraud through the use of an electronic fingerprint matching identification system. The law also stipulates that the project should be conducted in Cook County, in a county contiguous to Cook County and in another county. In addition, the law allows the Department to test a retinal scanning identification

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system, in lieu of electronic fingerprinting, in one project area.

The Automated Identification and Match System (AIMS) demonstration project will be conducted over a three-year period in the DuPage County local office, the West Suburban and Western local offices in Cook County beginning December 1, 1996. This demonstration project will test the use of electronic fingerprinting technology to combat fraud and ensure that an individual receives public assistance in only one case at a time. It will also facilitate the provisions of equitable and timely benefits to eligible families through implementation of a user friendly and fair system. These amendments establish who must participate in the project, who is exempt, how clients will be notified of the project and the consequences of a client's failure or refusal to participate in the project.

AIMS focuses specifically on the identification of multiple case fraud. Client-related causes of multiple case fraud include the failure to report changes in household composition and residence, name-spelling changes and use of false or multiple documents. False documents include manufactured identity documents and documents belonging to another person, such as someone deceased, incarcerated or someone who has moved out of the State.

A biometric identification system works on the principle that a machine must positively identify a person by capturing, storing and matching physical characteristics unique to the individual. Among the characteristics used for this purpose are fingerprints, finger lengths, voice patterns and retinal patterns. Electronic fingerprinting technology is based on the fact that no two persons have the same fingerprint patterns, and with few exceptions, fingerprint patterns cannot be altered or obliterated.

The demonstration project will utilize AIMS (a computerized system that will obtain fingerprints electronically, store them and match the images against all others in its database). The system will link workstations in the three pilot IDPA offices to a central database and processor. The client's index fingers will be placed on the electronic scanner and the images will be scanned into the computer. An electronic photograph will also be taken of each client. Basic client information (such as name, case number, birthdate and sex), the digital photograph and the fingerprint detail data will be stored as part of the database.

The system will electronically capture and digitize each fingerprint and search the database to determine if it matches a set of images already on the AIMS system. AIMS will determine that fingerprints match in the following instances:

Full Matches occur when both left and right index fingerprints match a pair of fingerprints on the database, or when one finger

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is exempt and the other fingerprint matches on the database.

Half Matches occur when one of a pair of incoming fingerprints matches another image already on the database.

Not all matches identified by AIMS will be the result of fraud or attempted fraud. Nonfraud matches would include situations where clients believed that their cases were cancelled and reapplied for assistance when, in fact, their cases were only suspended. Another example would be persons legitimately in two cases (as the recipient in one case and as a nonaided payee in another case).

Goals

The goals of this demonstration are:

1. To determine whether electronic fingerprinting is a cost-effective method of detecting and preventing AFDC multiple case fraud.
2. To implement an electronic fingerprinting system that is user-friendly, reliable and easy to administer.
3. To implement an electronic fingerprinting system that is confidential, accurate and fair.
4. To encourage the public perception that safeguards are in place and that clients receiving benefits are truly eligible.

Confidentiality

As mandated in Public Act 88-554, fingerprint patterns obtained and stored by AIMS are confidential records to be used solely by the Department in the administration of the AFDC program. Fingerprint patterns will not be shared with any other agencies, including the Illinois State Police and the Immigration and Naturalization Service, nor will those or any other agency have access to the AIMS database.

Mandatory Participants

For the IDPA's AIMS project, all adult AFDC recipients and payees (including second parents and minor parents) and nonaided payees in the household will be fingerprinted. A person missing one index finger shall have the remaining index finger imaged. Temporary exemptions to fingerprinting will be permitted for persons with both hands either broken or bandaged. Permanent exemptions will be allowed for persons missing both hands or both index fingers. The fingerprinting requirement will not apply to IDPA staff persons appointed as protective payees.

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Client Cooperation

The failure or refusal to cooperate with the fingerprinting requirement by a mandatory participant will result in ineligibility for the AFDC case; that is, denial of the AFDC application or termination of an active case. When the AFDC portion of a combined AFDC/Food Stamp/Medical application is denied due to the failure or refusal to cooperate with the fingerprinting requirement, the Food Stamp and Medical portions will continue to be processed in accordance with existing policy. Active cases for which AFDC benefits have been terminated will be converted to Non-Assistance Food Stamp cases or Non-Assistance Food Stamp/Medical Assistance No Grant cases and sent to appropriate caseworker staff.

In the event of a system failure or prolonged downtime, the fingerprinting requirement will be considered as having been met if the applicant or recipient agrees to be fingerprinted. (The applicant or recipient will be required to return and complete the fingerprinting process when the system is again operational). In no case will issuance of benefits be delayed beyond regulatory time limits.

Client Notification

Material will be provided to all AFDC applicants which will thoroughly and clearly explain the fingerprinting process, the reasons for the process, the absolute confidentiality of information and the fact that cooperation with the fingerprinting process is a condition of eligibility. Active AFDC cases will receive an AIMS appointment letter in the mail. That letter will include a telephone number to call in order to reschedule the appointment, if necessary. Clients who refuse or fail to keep their appointments to be finger imaged, without good cause, will be issued an adequate and timely notice of denial or discontinuance.

- 16) Information and questions regarding these Adopted Amendments shall be directed to:

Judy Umunna
Bureau of Rules and Regulations
Illinois Department of Public Aid
100 South Grand Avenue East, Third Floor
Springfield, IL 62762
217/524-0081

The full text of the Adopted Amendments begins on the next page:

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NOTICE OF ADOPTED AMENDMENTS

TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF PUBLIC AID
SUBCHAPTER 9: DEMONSTRATION PROGRAMS

PART 170

DEMONSTRATION PROGRAMS

SUBPART A: THE FRESH START
WELFARE REFORM DEMONSTRATION PROGRAM

Section	Youth Employment and Training Initiative
170.10	
170.20	Paternal Involvement Project
170.30	Homeless Families Support Project
170.40	Family Responsibility Project
170.50	Income Budgeting Project

SUBPART B: THE CAREER ADVANCEMENT PROGRAM

Section	The Career Advancement Program
170.100	
170.110	Career Advancement Experimental and Control Groups
170.120	Career Advancement Participation Requirements of Experimental Group Members
170.130	Career Advancement Supportive Services for Experimental Group Members

SUBPART C: COMMUNITY GROUP PARTICIPATION PROGRAM

Section	Community Group Participation Program
170.200	

SUBPART D: EARNED INCOME INITIATIVE

Section	Work Pays Demonstration
170.250	

SUBPART E: FAMILY DEVELOPMENT PLAN

Section	Truancy Prevention Project
170.300	

SUBPART F: WORK AND RESPONSIBILITY DEMONSTRATION

Section	Family Accountability
170.350	
170.360	Get a Job Initiative
170.370	Targeted Work Initiative (TWI)
170.380	Quarterly Reporting - Failure to Report Employment Demonstration

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Projects
Employment Plan Demonstration Project

SUBPART G: BIOMETRIC IDENTIFICATION DEMONSTRATION

Section
170.400 Retinal Scanning
170.410 Electronic Fingerprinting (AIMS) Demonstration

SUBPART H: JOB OPPORTUNITIES AND BASIC SKILLS TRAINING (JOBS)
DEMONSTRATION PROGRAM

Section
170.450 Young Parent Services South Home Visitor Demonstration (Project Link)

AUTHORITY: Implementing and authorized by Sections 4-1, 4-1.10, 4-8, 4-17, 11-20, 12-13, and 12-4.28 of the Illinois Public Aid Code [305 ILCS 5/4-1, 4-1.10, 4-8, 4-17, 11-20, 12-13 and 12-4.28].

SOURCE: Adopted at 13 Ill. Reg. 14067, effective August 23, 1989; amended at 14 Ill. Reg. 19320, effective November 30, 1990; amended at 17 Ill. Reg. 19197, effective October 25, 1993; emergency amendment at 17 Ill. Reg. 19721, effective November 1, 1993, for a maximum of 150 days; amended at 18 Ill. Reg. 3372, effective February 28, 1994; emergency amendment at 19 Ill. Reg. 645, effective January 9, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 7901, effective June 8, 1995; emergency amendment at 19 Ill. Reg. 15256, effective November 1, 1995, for a maximum of 150 days; emergency amendment at 19 Ill. Reg. 15849, effective November 15, 1995, for a maximum of 150 days; emergency amendment at 19 Ill. Reg. 16314, effective December 1, 1995, for a maximum of 150 days; amended at 20 Ill. Reg. 866, effective January 1, 1996; amended at 20 Ill. Reg. 4333, effective February 29, 1996; amended at 20 Ill. Reg. 5685, effective March 30, 1996; amended at 20 Ill. Reg. 6029, effective April 12, 1996; amended at 20 Ill. Reg. 6517, effective April 29, 1996; amended at 20 Ill. Reg. 1700, effective JAN 27 1997.

SUBPART G: BIOMETRIC IDENTIFICATION DEMONSTRATION

Section 170.410 Electronic Fingerprinting (AIMS) Demonstration

The Department will operate the Illinois Automated Identification and Match System (AIMS) as a Statewide demonstration project for three years beginning December 1, 1996. The purpose of this project is to test the use of electronic fingerprinting technology. The DuPage County local office and the West Suburban and Western local offices in Cook County have been designated as the research sites.

- a) Selection of Participants
Unless exempt, the following persons will be required to participate in AIMS by undergoing electronic fingerprinting:

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- 1) all adult applicants for AFDC (Category 04) and AFDC-U (Category 06) cash assistance;
2) all adult recipients of AFDC (Category 04) and AFDC-U (Category 06) cash assistance, including:
A) second parents, and
B) minor grantees for cases in which he or she is considered an adult;

- 3) all payees for AFDC (Category 04) and AFDC-U (Category 06) assistance units who do not receive cash benefits in the case.
b) Exemption From Participation in Fingerprinting

- 1) A person with both index fingers broken or bandaged will be granted a temporary exemption from participation. To be granted the exemption, the person must provide documentation from a physician which verifies the medical condition. The documentation must state when the person can be fingerprinted. The length of the exemption shall be based on the physician's statement. When the person's condition improves to the point where he or she can be fingerprinted, the Department shall contact the person so that he or she can complete the process.

- 2) A person who is missing both hands or both index fingers will be granted a permanent exemption from participation.

c) Participant Cooperation

- 1) The failure or refusal of a mandatory participant who is not medically exempt to cooperate with AIMS requirements will result in ineligibility for the entire AFDC assistance unit.

- A) When the cash assistance portion of an application for AFDC, Medical and/or Food Stamps is denied, the local office will continue to process the Medical and Food Stamp portions.

- B) Active cases for which AFDC cash assistance has been terminated will continue to be eligible for Medical Assistance and Food Stamps.

- 2) In the event of a system failure or prolonged downtime (30 minutes or more), a person who agrees to be fingerprinted shall be considered as having cooperated. The person shall be required to return to the local office, within a specified period of time, to complete the fingerprinting process when the system is operational. If the individual does not return, within the specified period of time, he or she will be considered as not cooperating.

- 3) A mandatory adult who does not cooperate with AIMS requirements and applies for AFDC at another local office shall have the reason for his or her non-cooperation reviewed by the Department. In no instance shall the issuance of benefits be delayed beyond the application processing time limits as specified in 89 Ill. Adm. Code 110.20.

- 5) The Department shall provide material to all AFDC applicants and recipients which will explain the following information:
A) the fingerprinting process;

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- B) the reason for the process;
 C) the confidentiality of the information; and
 D) the fact that cooperation with the fingerprinting process is a condition of eligibility.

d) Intake

The local office will fingerprint a person when he or she applies for assistance. The local office shall be notified if an applicant fails to complete the fingerprinting process. The applicant will be given a second opportunity to be fingerprinted as part of the eligibility interview process. If the applicant fails to appear for the eligibility interview or refuses to be fingerprinted, the Department shall deny the cash assistance portion of his or her application.

e) Active Cases

1) The local office shall send a notice to adults in AFDC cases scheduled for a face-to-face redetermination advising them of the fingerprinting requirement. The notice shall also advise the mandatory adult or adults that they will be scheduled for a fingerprinting appointment at the completion of their redetermination interview.

2) The Department shall centrally generate and mail a fingerprinting reminder notice to clients in AFDC cases not scheduled for a mail-in redetermination. The notice shall remind the client that fingerprinting is a requirement for continued AFDC cash eligibility.

A) The notice shall instruct the client to contact the local office if he or she is unable to keep his or her appointment. The letter shall also provide a telephone number for this purpose.

B) The notice shall advise clients that they must comply with the fingerprinting requirement and reschedule the appointment in order to prevent cancellation of their case or cases. Clients who fail to respond to the notice will have their AFDC cash assistance canceled.

3) The local office shall make every effort to accommodate clients when they must reschedule their fingerprinting appointments. When a mandatory client fails to appear for his or her scheduled appointment and does not call to reschedule, the local office shall send a notice of negative action to the client for failure to comply with fingerprinting requirements.

4) The Department's investigators shall advise the local office to take appropriate action to cancel AFDC cash assistance if their investigation validates the match and finds no satisfactory reason for its occurrence. The Department shall give the assistance unit appropriate notice that their cash assistance is being canceled. Once the appropriate notice has been given, the local office shall cancel the cash assistance portion of the AFDC case.

5) Whenever a new adult is added to an active case or there is a

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change in the payee, the local office shall inform the new person of the AIMS requirements and schedule a fingerprinting appointment.

6)

If a mandatory adult who is included in or is the payee for an active AFDC Medicaid case requests AFDC cash assistance, the local office shall inform the person of the AIMS requirements and schedule a fingerprinting appointment. If the person fails to comply with AIMS requirements, the local office shall not approve the request for cash assistance.

(Source: Added at 20 Ill. Reg. 1706 effective
 JAN 27 1997)

SECRETARY OF STATE

NOTICE OF EMERGENCY AMENDMENTS

- 1) Heading of the Part: Department of Personnel
- 2) Code Citation: 80 Ill. Adm. Code 420
- 3)

<u>Section Number</u>	<u>Emergency Action</u>
420.10	Amendment
420.415	New Section
420.665	New Section
420.680	Amendment
420.825	New Section
- 4) Statutory Authority: Implementing and authorized by Section 10 of the Secretary of State Merit Employment Code [15 ILCS 310/10].
- 5) Effective date of the Amendment: January 27, 1997
- 6) Expiration Date: This rule shall expire upon the earlier of 150 days from the effective date or the adoption of the currently pending proposed rules.
- 7) Date filed in agency's principal office: January 27, 1997
- 8) Reason for the emergency: Without proper employment standards, this office may be required to withdraw SOS police from multi-police agency task forces. This rule is a result of a decision by the Secretary of State Merit Commission. The removal of SOS police from these units would be detrimental to the public.
- 9) A Complete Description of the Subjects and Issues Involved: These rules respond to a Secretary of State Merit Commission order requiring rules for employment standards for sworn personnel (Secretary of State police) in positions on inter-agency assignments, e.g., the task force on auto theft comprised of SOS police, state troopers, and local law enforcement.
- 10) Are there proposed rules pending on this Part: Proposed rules appear in this Register.
- 11) Statement of Statewide Policy Objectives: This rulemaking does not affect units of local government.
- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking. Written comments may be submitted within 45 days to:

Deanna Patton
Department of Personnel
Room 196, Howlett Building
Springfield, IL 62756
217/782-4783

SECRETARY OF STATE

NOTICE OF EMERGENCY AMENDMENTS

The full text of the emergency amendments begins on the next page:

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NOTICE OF EMERGENCY AMENDMENTS

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES
 SUBTITLE B: PERSONNEL RULES, PAY PLANS, AND
 POSITION CLASSIFICATIONS
 CHAPTER II: SECRETARY OF STATE

PART 420

DEPARTMENT OF PERSONNEL

SUBPART A: INTRODUCTION

Section	Definitions
420.10	
<u>EMERGENCY</u>	
420.200	
420.210	
420.220	

SUBPART B: CLASSIFICATION AND PAY

Section	Positions
420.200	
420.210	Position Classification
420.220	Pay Plan

SUBPART C: MERIT AND FITNESS

Section	Application and Examination
420.300	
420.310	Appointment and Selection
420.320	Trainees
420.330	Intermittents
420.340	Continuous Service
420.350	Performance Review
420.360	Probationary Status
420.370	Promotions
420.380	Employee Transfers
420.390	Demotion
420.400	Layoffs and Reemployment
420.410	Voluntary Reduction
420.415	<u>Sworn Personnel--Inter-Agency Assignment</u>
<u>EMERGENCY</u>	
420.420	Resignation and Reinstatement
420.430	Discipline, Discharge, and Termination
420.435	Return of State Property

SUBPART D: CONDITIONS OF EMPLOYMENT

Section	Grievance Procedure
420.600	
420.610	Sick Leave
420.620	Leave for Personal Business

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420.630	On-The-Job Injury--Industrial Disease
420.640	Leaves of Absence Without Pay
420.645	Adoption/Child Care Leave
420.650	Limitations on Leaves of Absence
420.660	Leaves of Absence--Special
420.665	<u>Leaves of Absence--Sworn Personnel--Inter-Agency Assignment</u>
<u>EMERGENCY</u>	
420.670	Leaves of Absence--Special--Salary
420.680	Employee Rights After Leave
<u>EMERGENCY</u>	
420.690	Leave of Absence--Election to Public Office
420.700	Failure to Return From Leave of Absence
420.710	Military and Peace Corps Leave
420.720	Leave For Annual Military Reserve Training or Special Duty
420.730	Leave for Military Physical Examinations
420.740	Leave to Take Exempt Position
420.760	Disability Leave
420.770	Attendance in Court
420.800	Vacation
420.810	Work Schedules
420.820	Overtime
420.825	<u>Temporary Assignment</u>
<u>EMERGENCY</u>	
420.830	Holidays

SUBPART E: GENERAL PROVISIONS

Section	Records
420.1000	
420.1010	Benefits
420.1030	Other Provisions

AUTHORITY: Implementing and authorized by Section 10 of the Secretary of State Merit Employment Code [15 ILCS 310/10].

SOURCE: Emergency rule adopted December 29, 1977; amended at 3 Ill. Reg. 49, p. 159, effective October 1, 1979; amended at 4 Ill. Reg. 40, p. 219, effective December 1, 1980; amended at 6 Ill. Reg. 3302, effective March 16, 1982; amended at 6 Ill. Reg. 7494, effective June 16, 1982; amended at 7 Ill. Reg. 11526, effective September 7, 1983; codified at 8 Ill. Reg. 2653; recodified at 10 Ill. Reg. 15659; amended at 12 Ill. Reg. 6766, effective April 1, 1988; amended at 17 Ill. Reg. 1652, effective February 1, 1993; emergency amendment at 21 Ill. Reg. 1710 ³, effective January 27, 1997, for a maximum of 150 days.

SUBPART A: INTRODUCTION

Section 420.10 Definitions

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EMERGENCY

"Appropriate Supervisor": An employee who has the authority to resolve an employee's grievance.

"Board": Refers to the Merit Advisory Board.

"Certified Employee": An employee who has successfully completed an appointment and a required probationary period.

"Certified Status": Status achieved through the completion of a probationary period.

"Class": A composite of positions which are sufficiently similar, in terms of duties and responsibilities, requiring the same or related knowledges, skills, abilities and licenses (if required) to fulfill them, and the same title, selection instrument, salary range or rate of pay that would apply equitably to each. Example: All Executive I positions in the Office of the Secretary of State are a class.

"Code": The Secretary of State Merit Employment Code (Ill. Rev. Stat. 1981, ch. 124, pars. 101 et seq.).

"Commission": The Secretary of State Merit Commission.

"Department of Personnel": The Secretary of State Department of Personnel.

"Director of Personnel": The Director of the Secretary of State Department of Personnel.

"Executive or Administrative Employee": Those employees who have principal administrative responsibility for the determination of policy or principal administrative responsibility for the way in which policies are carried out.

"Executive Security Officer": A law enforcement officer charged with executive protective duties.

"Highly Confidential Employee": An employee who occupies a position which, by its nature, is entrusted with private, restricted or privileged information of a type which would preclude its being subject to Jurisdiction B.

"Immediate Family": Father, mother, brother, sister, son, daughter and spouse, including adoptive, custodial and "in-laws" when residing in the employee's household. For bereavement purposes, the term includes grandparents, grandchildren, parents-in-law, brother or

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sister-in-law, and children-in-law.

"Jurisdiction A": The Section of the Code which deals with the classification and compensation of positions in the Office of the Secretary of State.

"Jurisdiction B": The Section of the Code which deals with merit and fitness as it applies to positions in the Office of the Secretary of State.

"Jurisdiction C": The Section of the Code which deals with the conditions of employment of positions of the Office of the Secretary of State.

"Licensed Attorney": Attorneys who are licensed to practice law within the State of Illinois.

"Next Higher Supervisor": An employee who is authorized to adjust grievance resolutions offered by an Appropriate Supervisor; an employee who may be locally or regionally assigned to resolve Level 2 grievances.

"Organizational Entity": An organization whose chief executive officer reports directly to the Secretary of State or the Assistant Secretary of State.

"Position": A set of duties, authorities and responsibilities.

"Probationary Period": A period of six calendar months (or 979 hours) immediately following an original appointment or reinstatement, or a period of three months (489.5 hours) following a promotion.

"Seniority": In totality, the unbroken service of an employee by the Office of the Secretary of State, or such service immediately precedent to employment by the Secretary of State which was unbroken and accrued within the employ of an agency covered by the Personnel Code under the Governor or within the University Civil Service System.

"Series": A class series is composed of two or more individual classes which are directly related in type of work performed, responsibility exercised and background experience required, while differing in levels, difficulty and/or achievement of these same terms. The classes of a series are similar in title and are usually sequential in nature from lowest to highest. Example: Executive I, II, III, IV and V are a class series.

"Sworn Personnel--Inter-Agency Assignment": Employees of the Office, vested with police authority, who are assigned to an affiliated

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outside organization for a determined time frame to perform police officer duties.

"Time of Hostilities": The following periods of time: from April 6, 1917 to November 11, 1918; from December 7, 1941 to December 31, 1946; and from June 27, 1950 to December 31, 1976.

"Title": A title is the name by which a class is known.
Example: Executive I is a title.

"Unskilled Positions": Positions whose primary requirement is that incumbents be of good physical condition.

(Source: Emergency amendment at 21 Ill. Reg. 1710, effective January 27, 1997, for a maximum of 150 days)

SUBPART C: MERIT AND FITNESS

Section 420.415 Sworn Personnel--Inter-Agency Assignment
EMERGENCY

a) Definition: The movement, either lateral or upward of an employee, by request of the operating department and with the approval of the Department of Personnel, to a vacant position especially created for an Inter-Agency assignment. This movement shall not be considered the permanent position of the employee assigned.

b) Eligibility for Inter-Agency Assignment: The employee must be certified in a classification determined to be that of sworn personnel having police authority by the Director of Personnel.

c) Limitations on Inter-Agency Assignments:

- 1) Inter-Agency assignments are voluntary.
- 2) The operating department must provide written notification of an assignment, and the employee must give written acceptance.
- 3) The duration of the assignment is at the discretion of the operating department director, but it shall be terminated within 10 working days of receipt of a written request from the employee for termination.
- 4) No provisional, temporary, emergency or exempt employee may be detailed.

d) Rights of Assigned Employees:

- 1) Assigned employees shall be placed on a Leave of Absence--Sworn Personnel--Inter-Agency Assignment in accordance with Section 420.665.
- 2) Assigned employees shall retain status, continuous service and all accrued benefits. Pay shall be consistent with the classification utilized for the assignment until the return to the official position.
- e) Temporary assignment for Inter-Agency Assigned Employee's Position:

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The operating department may temporarily assign another sworn employee to perform the duties of the position vacated by the assigned employee in accordance with Section 420.825.

(Source: Added by emergency rule at 21 Ill. Reg. 1710, effective January 27, 1997, for a maximum of 150 days)

SUBPART D: CONDITIONS OF EMPLOYMENT

Section 420.665 Leaves Of Absence--Sworn Personnel--Inter-Agency Assignment
EMERGENCY

The Director of Personnel shall grant leaves of absence to sworn personnel for an Inter-Agency assignment accepted for the duration of the assignment. When an employee returns from this leave, the department shall return the employee to the same or similar position in the class in which the employee was incumbent prior to the commencement of such leave.

(Source: Add by emergency rule at 21 Ill. Reg. 1710, effective January 27, 1997, for a maximum of 150 days)

Section 420.680 Employee Rights After Leave
EMERGENCY

- a) When an employee returns from a leave of absence of six months or less, the department shall return the employee to the same or similar position in the class in which the employee was incumbent prior to the commencement of such leave.
- b) Except for those leaves granted under Sections 420.630, 420.665, 420.740 or 420.710 and when an employee returns from a leave or leaves exceeding six months and there is no vacant position available to such employee in the same class in which the employee was incumbent prior to such leave or leaves commencing, the employee may be laid off without consideration of continuous service and if laid off, the employee's name shall be placed on the reemployment list.

(Source: Emergency amendment at 21 Ill. Reg. 1710, effective January 27, 1997, for a maximum of 150 days)

Section 420.825 Temporary Assignment
EMERGENCY

- a) Definition: Temporary Assignment is to direct an employee in a specific position to perform the duties or responsibilities of another position which is equal to or higher than the classification to which the employee is incumbent. This directive must be written, approved by the Director of Personnel, and acknowledged by the employee.
- b) Application: This Section does not apply to any assignment of less

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than thirty (30) calendar days.

c) Filling of Temporary Assignments: Temporary assignments may be granted for the following reasons:

1) While the operating department posts and/or fills a vacant position.

2) While an absent regular incumbent is utilizing extended sick leave.

3) While an absent regular incumbent is on a leave of absence.

4) While an absent regular incumbent is utilizing extended vacation time.

d) Length of Temporary Assignment: Temporary assignments shall not exceed six (6) months, except for those made in accordance with Section 420.415(e) which may be extended for good cause by the department for additional time periods with the Director of Personnel's approval and the employee's written consent.

e) Identifying Temporary Assignments: The operating department will attempt to assign temporary assignment to the employees in the next lower or equivalent classification and to equitably distribute such assignments on a rotating basis giving due consideration to seniority and the operating needs of the department.

f) Eligibility for Temporary Assignment: To be eligible for temporary assignment pay, employees must be directed to perform the duty or duties which distinguish the higher level position classification and/or be held accountable for the responsibility of the assigned position classification.

g) Temporary Assignment Pay--Equal Classification: Employees temporarily assigned to position classifications in equal pay grades or rates to their permanent position classifications shall be paid their appropriate permanent position classification rate in accordance with the Pay Plan.

h) Temporary Assignment Pay--Higher Classification: Employees temporarily assigned to position classifications having higher pay grades or rates than their permanent position classification, shall be paid as if they had received promotions into such higher pay grades in accordance with the Pay Plan.

i) Termination of Temporary Assignment: Employees' pay shall return to the appropriate permanent rate when the temporary assignment has ended.

j) Indefinite Assignments: Temporary job assignment's shall not be of indefinite duration and shall not be considered the permanent position of the employee assigned; therefore, temporary assignment duties shall not be the subject of an allocation appeal.

(Source: Added by emergency rule at 21 Ill. Reg. _____, effective January 27, 1997, for a maximum of 150 days)

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DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT

- 1) Heading of Part: Meat and Poultry Inspection Act
- 2) Code Citation: 8 Ill. Adm. Code 125
- 3) Section Numbers: Peremptory Action:
Amended
125.270
- 4) Reference to the Specific State or Federal Court Order, Federal Rule or Statute which requires this Peremptory Rulemaking: The Meat and Poultry Inspection Act [225 ILCS 650]; the Federal Meat Inspection Act (21 U.S.C.A. 661); and 61 FR 58780 (1996).
- 5) Statutory Authority: The Meat and Poultry Inspection Act [225 ILCS 650].
- 6) Effective Date: January 28, 1997
- 7) A Complete Description of the Subjects and Issues Involved: In order to maintain an "equal to" status with the federal meat inspection program as required by the Federal Meat Inspection Act and in compliance with Section 16 of the Meat and Poultry Inspection Act, changes in the federal rules relative to meat inspection are hereby adopted.

The Food Safety and Inspection Service is "amending the Federal meat inspection regulations to permit the use of corn syrup, corn syrup solids, and glucose syrup as flavoring agents in meat products at an amount sufficient for that purpose." (For additional information, refer to the November 19, 1996 issue of the Federal Register, page 58780.) The specific federal regulation being amended is 9 CFR Part 318.7(c)(4).
- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Date Filed in Agency's Principal Office: January 27, 1997
- 10) This rule is in compliance with Section 5.03 of the Illinois Administrative Procedure Act.
- 11) Are there any proposed amendments pending to this Part? Peremptory amendment published at 21 Ill. Reg. 1221, effective January 14, 1997 (Section 125.380).
- 12) Statement of Statewide Policy Objectives: Rulemaking does not affect units of local governments.
- 13) Information and questions regarding this adopted amendment shall be directed to:

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT

Name: Debbie Wakefield
 Address: Illinois Department of Agriculture
 State Fairgrounds
 P.O. Box 19281
 Springfield, Illinois 62794-9281
 Telephone: 217/785-5713
 Facsimile: 217/785-4505

The full text of the Peremptory Amendment begins on the next page:

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT

TITLE 8: AGRICULTURE AND ANIMALS
 CHAPTER I: DEPARTMENT OF AGRICULTURE
 SUBCHAPTER C: MEAT AND POULTRY INSPECTION ACT

PART 125

MEAT AND POULTRY INSPECTION ACT

SUBPART A: GENERAL PROVISIONS FOR BOTH MEAT AND/OR POULTRY INSPECTION

Section	
125.10	Definitions
125.20	Incorporation by Reference of Federal Rules
125.30	Application for License; Approval
125.40	Official Number
125.50	Inspections; Suspension or Revocation of License
125.60	Administrative Hearings; Appeals
125.70	Assignment and Authority of Program Employees
125.80	Schedule of Operations; Overtime
125.90	Official Marks of Inspection, Devices and Certificates
125.100	Records and Reports
125.110	Exemptions
125.120	Disposal of Dead Animals and Poultry
125.130	Reportable Animal and Poultry Diseases
125.140	Detention; Seizure; Condemnation

SUBPART B: MEAT INSPECTION

Section	
125.150	Livestock and Meat Products Entering Official Establishments
125.160	Equine and Equine Products
125.170	Facilities for Inspection
125.180	Sanitation
125.190	Ante-Mortem Inspection
125.200	Post-Mortem Inspection
125.210	Disposal of Diseased or Otherwise Adulterated Carcasses and Parts
125.220	Humane Slaughter of Animals
125.230	Handling and Disposal of Condemned or Other Inedible Products at Official Establishment
125.240	Rendering or Other Disposal of Carcasses and Parts Passed for Cooking
125.250	Marking Products and Their Containers
125.260	Labeling, Marking and Containers
125.270	Entry into Official Establishment; Reinspection and Preparation of Product
125.280	Meat Definitions and Standards of Identity or Composition
125.290	Transportation
125.295	Imported Products
125.300	Special Services Relating to Meat and Other Products

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125.305 Exotic Animal Inspection

SUBPART C: POULTRY INSPECTION

Section

- 125.310 Application of Inspection
 125.320 Facilities for Inspection
 125.330 Sanitation
 125.340 Operating Procedures
 125.350 Ante-Mortem Inspection
 125.360 Post-Mortem Inspection; Disposition of Carcasses and Parts
 125.370 Handling and Disposal of Condemed or Inedible Products at Official Establishments
 125.380 Labeling and Containers
 125.390 Entry of Articles Into Official Establishments; Processing Inspection and Other Reinspections; Processing Requirements
 125.400 Definitions and Standards of Identity or Composition
 125.410 Transportation; Sale of Poultry or Poultry Products

AUTHORITY: Implemented and authorized by the Meat and Poultry Inspection Act [225 ILCS 650] and Section 16 of the Civil Administrative Code of Illinois [20 ILCS 5/16].

SOURCE: Adopted at 9 Ill. Reg. 1782, effective January 24, 1985; peremptory amendment at 9 Ill. Reg. 2337, effective January 28, 1985; peremptory amendment at 9 Ill. Reg. 2980, effective February 20, 1985; peremptory amendment at 9 Ill. Reg. 4856, effective April 1, 1985; peremptory amendment at 9 Ill. Reg. 9240, effective June 5, 1985; peremptory amendment at 9 Ill. Reg. 10102, effective June 13, 1985; peremptory amendment at 9 Ill. Reg. 11673, effective July 17, 1985; peremptory amendment at 9 Ill. Reg. 13748, effective August 23, 1985; peremptory amendment at 9 Ill. Reg. 15575, effective October 2, 1985; peremptory amendment at 10 Ill. Reg. 19759, effective December 5, 1985; peremptory amendment at 10 Ill. Reg. 447, effective December 23, 1985; peremptory amendment at 10 Ill. Reg. 1307, effective January 7, 1986; peremptory amendment at 10 Ill. Reg. 3318, effective January 24, 1986; peremptory amendment at 10 Ill. Reg. 3880, effective February 7, 1986; peremptory amendment at 10 Ill. Reg. 11478, effective June 25, 1986; peremptory amendment at 10 Ill. Reg. 14858, effective August 22, 1986; peremptory amendment at 10 Ill. Reg. 15305, effective September 19, 1986; peremptory amendment at 10 Ill. Reg. 16743, effective September 19, 1986; peremptory amendment at 10 Ill. Reg. 18203, effective October 15, 1986; peremptory amendment at 10 Ill. Reg. 19818, effective November 12, 1986; peremptory amendment at 11 Ill. Reg. 1696, effective January 5, 1987; peremptory amendment at 11 Ill. Reg. 2930, effective January 23, 1987; peremptory amendment at 11 Ill. Reg. 9645, effective April 29, 1987; peremptory amendment at 11 Ill. Reg. 10321, effective May 15, 1987; peremptory amendment at 11 Ill. Reg. 11184, effective June 5, 1987; peremptory amendment at 11 Ill. Reg. 14830, effective August 25, 1987; peremptory amendment at 11 Ill. Reg. 18799, effective November

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3, 1987; peremptory amendment at 11 Ill. Reg. 19805, effective November 19, 1987; peremptory amendment at 12 Ill. Reg. 2154, effective January 6, 1988; amended at 12 Ill. Reg. 3417, effective January 22, 1988; peremptory amendment at 12 Ill. Reg. 4879, effective February 25, 1988; peremptory amendment at 12 Ill. Reg. 6313, effective March 21, 1988; peremptory amendment at 12 Ill. Reg. 6819, effective March 29, 1988; peremptory amendment at 12 Ill. Reg. 13621, effective August 8, 1988; peremptory amendment at 12 Ill. Reg. 19116, effective November 1, 1988; peremptory amendment at 12 Ill. Reg. 20894, effective December 21, 1988; peremptory amendment at 13 Ill. Reg. 228, effective January 11, 1989; peremptory amendment at 13 Ill. Reg. 2160, effective February 13, 1989; amended at 13 Ill. Reg. 3696, effective March 13, 1989; peremptory amendment at 13 Ill. Reg. 15853, effective October 5, 1989; peremptory amendment at 13 Ill. Reg. 16838, effective October 11, 1989; peremptory amendment at 13 Ill. Reg. 17495, effective January 18, 1990; amended at 14 Ill. Reg. 3424, effective February 26, 1990; peremptory amendment at 14 Ill. Reg. 4953, effective March 23, 1990; peremptory amendment at 14 Ill. Reg. 11401, effective July 6, 1990; peremptory amendment at 14 Ill. Reg. 13355, effective August 20, 1990; peremptory amendment at 14 Ill. Reg. 16064, effective September 24, 1990; peremptory amendment at 14 Ill. Reg. 21060, effective May 29, 1991; peremptory amendment at 15 Ill. Reg. 620, effective January 2, 1991; peremptory amendment withdrawn at 15 Ill. Reg. 1574, effective January 2, 1991; peremptory amendment at 15 Ill. Reg. 3117, effective September 3, 1991; peremptory amendment at 15 Ill. Reg. 8714, effective May 29, 1991; amended at 15 Ill. Reg. 8801, effective June 7, 1991; peremptory amendment at 15 Ill. Reg. 13976, effective September 20, 1991; peremptory amendment at 16 Ill. Reg. 1899, effective March 2, 1992; amended at 16 Ill. Reg. 8349, effective May 26, 1992; peremptory amendment at 16 Ill. Reg. 11687, effective July 10, 1992; peremptory amendment at 16 Ill. Reg. 11963, effective July 22, 1992; peremptory amendment at 16 Ill. Reg. 12234, effective July 24, 1992; peremptory amendment at 16 Ill. Reg. 16337, effective October 19, 1992; peremptory amendment at 16 Ill. Reg. 17165, effective October 21, 1992; peremptory amendment at 17 Ill. Reg. 2063, effective February 12, 1993; peremptory amendment at 17 Ill. Reg. 15725, effective September 7, 1993; peremptory amendment at 17 Ill. Reg. 16238, effective September 8, 1993; peremptory amendment at 17 Ill. Reg. 18215, effective October 5, 1993; peremptory amendment at 18 Ill. Reg. 304, effective December 23, 1993; peremptory amendment at 18 Ill. Reg. 2164, effective January 24, 1994; amended at 18 Ill. Reg. 4622, effective March 14, 1994; peremptory amendment at 18 Ill. Reg. 6442, effective April 18, 1994; peremptory amendment at 18 Ill. Reg. 8493, effective May 27, 1994; amended at 18 Ill. Reg. 11489, effective July 7, 1994; peremptory amendment at 18 Ill. Reg. 12546, effective July 29, 1994; peremptory amendment at 18 Ill. Reg. 14475, effective September 7, 1994; amended at 18 Ill. Reg. 14924, effective September 26, 1994; peremptory amendment at 18 Ill. Reg. 15452, effective September 27, 1994; peremptory amendment at 19 Ill. Reg. 1342, effective January 27, 1995; peremptory amendment at 19 Ill. Reg. 4765, effective March 13, 1995; peremptory amendment at 19 Ill. Reg. 7067, effective May 8, 1995; peremptory amendment at 19 Ill. Reg. 14896, effective October 6, 1995; peremptory amendment at 19 Ill. Reg. 15766, effective November 10, 1995; peremptory amendment at 19 Ill. Reg.

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16866, effective December 22, 1995; peremptory amendment at 20 Ill. Reg. 5091, effective March 19, 1996; peremptory amendment at 20 Ill. Reg. 10403, effective July 17, 1996; amended at 20 Ill. Reg. 11928, effective September 1, 1996; peremptory amendment at 20 Ill. Reg. 12634, effective September 5, 1996; peremptory amendment at 20 Ill. Reg. 15371, effective November 13, 1996; peremptory amendment at 21 Ill. Reg. 1221, effective January 14, 1997; peremptory amendment at 21 Ill. Reg. ~~171034~~ effective JAN 28 1997

SUBPART B: MEAT INSPECTION

Section 125.270 Entry into Official Establishment; Reinspection and Preparation of Product

- a) The Department incorporates by reference 9 CFR 318.1(c) through 318.7, 318.9 through 318.10, 318.14 through 318.20, 318.22, 318.23, 318.24, 318.300 through 318.311 (1990); 54 FR 43041, effective January 18, 1990; 55 FR 7294, effective August 28, 1990; 55 FR 34678, effective September 24, 1990, as amended by 55 FR 49991, December 4, 1990; 57 FR 27870, effective July 22, 1992; 57 FR 42885, effective October 19, 1992; 58 FR 4067, effective February 12, 1993; 58 FR 41138, effective September 1, 1993; 58 FR 42188, effective September 8, 1993; 58 FR 45238 and 58 FR 45240, effective September 27, 1993; 58 FR 59934, effective December 13, 1993; 58 FR 63521, effective January 3, 1994; 59 FR 12536, effective April 18, 1994; 59 FR 33641, effective June 30, 1994; 59 FR 41640, effective September 14, 1994; 59 FR 62551, effective January 5, 1995; 60 FR 10304, effective February 24, 1995; 60 FR 54295, effective December 22, 1995; 61 FR 18047, effective June 24, 1996; 60 FR 55962, effective November 4, 1996; 61 FR 58780, effective January 21, 1997.

- b) No meat or meat product shall be brought into an official establishment unless it is inspected or has been prepared in an official establishment or in a federally licensed establishment and is identified by an official inspection legend as set forth in Section 125.90, a federal inspection legend, or is exempt from inspection as stated in Section 125.110. Meat and meat products received in an official establishment during the absence of the inspector shall be identified as set forth in Section 125.200 and, unless exempt from inspection, shall not be used or prepared until they have been reinspected. Any meat and meat product originally prepared at any official establishment may not be returned to any part of such establishment other than the receiving area until it has been reinspected by the inspector and passed. Wild game carcasses shall comply with Section 5(B)(4) of the Act. The official establishment shall maintain an inventory of non-meat items (e.g., spices, preservatives) which are received at the official establishment. Any product that is brought on the premises of an official establishment contrary to the provisions of this Section shall be removed

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- immediately from such establishment by the operator of the establishment.
- c) Reinspections of meat and/or meat products within the official establishment shall be performed through the use of a random digit table.
- d) Docks and receiving rooms for meat and/or meat products or other articles used by the establishment in the preparation of meat products entering an official establishment shall be approved by the inspector if the location of such docks or receiving rooms will not permit such product or article to pass through rooms containing inspected and passed products.
- e) The manner of defrosting frozen products and methods of treating to preserve products shall be in accordance with procedures as set forth in the "Meat and Poultry Inspection Manual" as adopted in Section 125.20.
- f) Casings or weasand shall be inspected and passed if it is in compliance with the specific provisions as stated in 9 CFR 318.5(i) for passage of such articles.
- g) The Department does not approve new substances to be used on meat or in meat products, their uses or the levels of use of an approved substance. Such substances will be permitted to be used and artificial flavorings may be used if they do not adulterate the meat and/or meat product in accordance with Section 2.11 of the Act and are in compliance with the provisions of this Section.
- h) References to exemptions from slaughter and custom slaughter shall mean those exemptions set forth in Section 125.110.
- i) Reference to 9 CFR 327 are not applicable to the Department in its enforcement of the rules of this Part. References to the federal Poultry Inspection Act, Section 403 of the Act, Section 7 of the Act, 9 CFR 303, and paragraph 23(a) of the Act shall be interpreted to mean in accordance with The Meat and Poultry Inspection Act and the rules of this Part.
- j) The Department does not approve thermometers for use in smokehouses, dry rooms and other compartments that are used in the treatment of pork.
- k) Disinfectants shall be those as set forth in Section 125.180.
- l) Adequate vacuum shall be determined through the use of vacuum gauges.
- m) Canned products which may be processed without steampressure cooking shall be those products as stated in the "Meat and Poultry Inspection Manual" as adopted by the Department in Section 125.20.
- n) The inspector shall permit lots of canned product to be shipped from the official establishment prior to the completion of the incubation period on the representative samples in accordance with the specific provisions in 9 CFR 318.309.
- o) The standards and procedures for determining when ingredients of finished products are in compliance with this Section shall be as set forth in the "Meat and Poultry Inspection Manual" as adopted by the Department in Section 125.20.

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NOTICE OF PEREMPTORY AMENDMENT

1719

(Source: ~~Peremptory~~ amendment at 21 Ill. Reg. _____, effective _____, **JAN 28 1987**)

DEPARTMENT OF INSURANCE

NOTICE OF CODIFICATION CHANGE

1) Heading of the Part: Definition of Salary

2) Code Citation: 50 Ill. Adm. Code 6302

3) Date of Index Department Review: January 28, 1997

4) Heading and Section Numbers of the Part being Recodified:

Section Numbers:	Heading:
6302.10	Authority
6302.20	Purpose and Scope
6302.30	Salary Contributions and Pension Computations
	Definitions
6302.35	Salary for Pension Purposes
6302.40	Non-Salary Compensation
6302.50	Retroactive Pay Increases
6302.60	Accumulated Unused Time at Retirement or Disability

5) Outline of the Section Numbers and Headings of the Part as Recodified:

Section Numbers:	Headings:
4402.10	Authority
4402.20	Purpose and Scope
4402.30	Salary Contributions and Pension Computations
	Definitions
4402.35	Salary for Pension Purposes
4402.40	Non-Salary Compensation
4402.50	Retroactive Pay Increases
4402.60	Accumulated Unused Time at Retirement or Disability

6) Conversion Table of Present and Recodified Parts:

Present Part: (Section Numbers)	Recodified Part: (Section Numbers)
6302.10	4402.10
6302.20	4402.20
6302.30	4402.30
6302.35	4402.35
6302.40	4402.40
6302.50	4402.50
6302.60	4402.60

7) Agency Explanation: The Department is renumbering Part 6302 to Part 4402.

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NOTICE OF CODIFICATION CHANGE

Substantively, there are no changes being made. The Department is simply renumbering this regulation to correspond with the Department's renumbering schematic.

DEPARTMENT OF INSURANCE

NOTICE OF CODIFICATION CHANGE

1) Heading of the Part: Health Maintenance Organizations

2) Code Citation: 50 Ill. Adm. Code 6101

3) Date of Index Department Review: January 28, 1997

4) Heading and Section Numbers of the Part being Recodified:

Section Numbers:	Heading:
6101.10	Scope
6101.20	Definitions
6101.30	Valuation of Investments
6101.40	Grievance Procedure
6101.50	Contracts, Administrative Arrangements and Material Modifications
6101.60	Rates
6101.70	Subordinated Indebtedness
6101.80	Financial Reporting
6101.90	Conflict of Interest and Required Disclosure
6101.100	Solicitation
6101.110	Requirements for Group Contracts, Evidences of Coverage and and Individual Contracts
6101.111	Cancellation
6101.112	Form Filing Requirements
6101.113	Point of Service Plan Requirements
6101.120	Internal Security Standards and Fidelity Bonds
6101.130	Basic Health Care Services
6101.140	General Provisions
6101.141	HMO Producer Licensing Requirements
6101.142	Limited Insurance Representative Requirements - Public Aid and Medicare Enrollers
6101.150	Severability
6101.160	Effective Date (Repealed)

5) Outline of the Section Numbers and Headings of the Part as Recodified:

Section Numbers:	Headings:
5421.10	Scope
5421.20	Definitions
5421.30	Valuation of Investments
5421.40	Grievance Procedure
5421.50	Contracts, Administrative Arrangements

DEPARTMENT OF INSURANCE

NOTICE OF CODIFICATION CHANGE

5421.60 and Material Modifications
 5421.70 Rates
 5421.80 Subordinated Indebtedness
 5421.90 Financial Reporting
 5421.100 Conflict of Interest and Required
 5421.110 Disclosure
 Solicitation
 Requirements for Group Contracts,
 Evidences of Coverage and Individual
 Contracts
 Cancellation
 Form Filing Requirements
 Point of Service Plan Requirements
 Internal Security Standards and
 Fidelity Bonds
 5421.130 Basic Health Care Services
 5421.140 General Provisions
 5421.141 RMO Producer Licensing Requirements
 5421.142 Limited Insurance Representative
 Requirements - Public Aid and Medicare
 Enrollers
 Severability
 5421.150 Effective Date (Repealed)
 5421.160

DEPARTMENT OF INSURANCE

NOTICE OF CODIFICATION CHANGE

6101.160

5421.160

7) Agency Explanation: The Department is recodifying Part 6101 which was formerly found in Subchapter ddd to a new Subchapter kkk entitled Health Service Plans. Substantially, no changes have been made.

6) Conversion Table of Present and Recodified Parts:

Present Part: (Section Numbers)	Recodified Part: (Section Numbers)
6101.10	5421.10
6101.20	5421.20
6101.30	5421.30
6101.40	5421.40
6101.50	5421.50
6101.60	5421.60
6101.70	5421.70
6101.80	5421.80
6101.90	5421.90
6101.100	5421.100
6101.110	5421.110
6101.111	5421.111
6101.112	5421.112
6101.113	5421.113
6101.120	5421.120
6101.130	5421.130
6101.140	5421.140
6101.141	5421.141
6101.142	5421.142
6101.150	5421.150

ILLINOIS HISTORIC PRESERVATION AGENCY

NOTICE OF WITHDRAWAL
TO MEET THE OBJECTION OF THE
JOINT COMMITTEE ON ADMINISTRATIVE RULES

ILLINOIS HISTORIC PRESERVATION AGENCY

NOTICE OF WITHDRAWAL
TO MEET THE OBJECTION OF THE
JOINT COMMITTEE ON ADMINISTRATIVE RULES

1) Heading of the Part: Rules for the Protection, Treatment, and Inventory
of Archaeological and Paleontological Resources on Public Lands

2) Code Citation: 17 Ill. Adm. Code 4190

3) Section Numbers:

	Action:
4190.101	Withdrawn
4190.102	Withdrawn
4190.103	Withdrawn
4190.104	Withdrawn
4190.105	Withdrawn
4190.106	Withdrawn
4190.107	Withdrawn
4190.108	Withdrawn
4190.109	Withdrawn
4190.110	Withdrawn
4190.111	Withdrawn
4190.112	Withdrawn
4190.201	Withdrawn
4190.202	Withdrawn
4190.203	Withdrawn
4190.204	Withdrawn
4190.205	Withdrawn
4190.206	Withdrawn
4190.301	Withdrawn
4190.302	Withdrawn
4190.303	Withdrawn
4190.401	Withdrawn
4190.402	Withdrawn
4190.403	Withdrawn
4190.404	Withdrawn
4190.405	Withdrawn
4190.406	Withdrawn
4190.407	Withdrawn
4190.408	Withdrawn
4190.409	Withdrawn
4190.410	Withdrawn
4190.501	Withdrawn
4190.601	Withdrawn
4190.602	Withdrawn
4190.603	Withdrawn

4) Date Notice of Proposed Rules Published in the Register: 8/9/96 at 20
Ill. Reg. 10496

5) Date JCAR Statement of Objection Published in the Register: 1/3/97 at 21

Ill. Reg. 495

6) Summary of Action Taken by the Agency: Agency is withdrawing entire proposed rule for the purpose of making revisions as recommended by JCAR staff. Revised rule will be submitted as a new rulemaking.

DEPARTMENT OF PUBLIC AID

NOTICE OF REFUSAL TO MEET THE OBJECTION
OF THE JOINT COMMITTEE ON ADMINISTRATIVE RULES

- 1) Heading of the Part: Demonstration Programs
- 2) Code Citation: 89 Ill. Adm. Code 170
- 3) Section Number: Emergency Action:
170.410 New Section
- 4) Notice of Proposed Amendments Published in the Illinois Register: April 26, 1996 (20 Ill. Reg. 5977)
- 5) JCAR Statement of Objection to Proposed Amendments Published in the Illinois Register: January 3, 1997 (21 Ill. Reg. 498)
- 6) Summary of Action Taken by the Agency:

At its meeting on November 19, 1996, the Joint Committee on Administrative Rules issued an objection to the Department of Public Aid's proposed amendments to its rules entitled Demonstration Programs (89 Ill. Adm. Code 170), which were published on April 26, 1996, at 20 Ill. Reg. 5977. The Joint Committee's objection states that the proposed amendments "clearly contravene statutory language at Section 11-6.2 of the Illinois Public Aid Code" [305 ILCS 5/11-6.2]. The relevant statutory provision states that the demonstration program "shall operate for 12 months," while the proposed amendments specify the length of the demonstration program as three years.

The Department believes that the statutory language can reasonably be interpreted as establishing only a minimum length of time for the operation of the program. In addition, operating the program in accordance with necessary federal waivers will require longer than 12 months. On that basis, the Department believes that the proposed amendments are appropriate. The Department agrees with the Joint Committee that legislation to amend the statutory provision should be pursued to resolve this conflict.

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

JANUARY 1997 REGULATORY AGENDA

- a) Part(s) (Heading and Code Citation): Pay Plan, 80 Ill. Adm. Code 310
 - 1) Rulemaking:
 - A) Description: Projected amendments to the Department of Central Management Services' Pay Plan will include revisions to the following sections:

In Sections 310.110, 310.130, 310.530, dates will be revised to reflect the new Fiscal Year.

In Section 310.230, Part-Time Daily or Hourly Special Services rate, the minimum hourly and daily rates will be upgraded to reflect the new minimum wage for Fiscal Year 1998. The hourly and daily rates for the Office Aide, Office Assistant, Office Associate, Office Clerk and Revenue Tax Specialist I will reflect the same increase as the RC-014 Collective Bargaining Agreement for the upcoming year.

In Section 310.270, Legislated and Contracted Rate, the Arbitrator's annual salary should be revised for July, 1997.

In Section 310.280, Designated Rate, the revisions that will be made to this section will include the latest changes pertaining to new or abolished positions and annual salaries.

In Section 310.290, Out-of-State or Foreign Service Rate, the salary ranges for the out-of-state position titles will be adjusted to maintain the same differential above the in-state position titles.

In Section 310.540, Annual Merit Increase Guidechart, the guidechart will be revised to reflect changes in allowable amounts of salary increases for the level of performance under the Merit Compensation System plan for Fiscal Year 1998.

In Section 310. Appendices B, C, D and G, amendments are anticipated to these salary schedules for Fiscal Year 1998.

Peremptory rulemakings will be filed pertaining to the new Collective Bargaining Contracts when negotiations are finalized.

Other amendments will likely be necessary, although this cannot be projected at this time.
- B) Statutory Authority: Authorized by Section 8a(2) of the Personnel Code [20 ILCS 415/8 and 8a]

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

JANUARY 1997 REGULATORY AGENDA

C) Scheduled meeting/hearing dates: Specific criticisms, suggestions and/or comments can be forwarded to the Department of Central Management Services in writing by interested persons during the First Notice Period of Pay Plan amendments.

D) Date agency anticipates First Notice: New Fiscal Year Amendments to the Pay Plan are projected to be filed before July 1, 1997, or after administrative agreements are concluded.

Peremptory rulemakings on the new Collective Bargaining Agreements will be filed after negotiations are finalized.

E) Affect on small businesses, small municipalities or not for profit corporations: These amendments to the Pay Plan pertain only to State employees subject to the Personnel Code under the Governor. They do not set out any guidelines that are to be followed by local or other jurisdictional bodies within the State.

F) Agency contact person for information:

Mr. Michael Murphy
Department of Central Management Services
Division of Technical Services
504 William G. Stratton Building
Springfield, IL 62706
(217) 782-5601

G) Related rulemakings and other pertinent information: Other amendments may be necessary based on emergent issues regarding State employee salary rates and policies. The Department of Central Management Services has proposed approximately ten amendments to the Pay Plan in an average six month period.

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

The following second notices were received by the Joint Committee on Administrative Rules during the period of January 21, 1997 through January 27, 1997 and have been scheduled for review by the Committee at its February 25, 1997 meeting in Springfield. Other items not contained in this published list may also be considered. Members of the public wishing to express their views with respect to a rule should submit written comments to the Committee at the following address: Joint Committee on Administrative Rules, 700 Stratton Bldg., Springfield, IL 62706.

Second Notice Expires	Agency and Rule	Start of First Notice	JCAR Meeting
3/7/97	Department of Natural Resources, The Taking of Wild Turkeys-Spring Season (17 Ill Adm Code 710)	12/2/96 20 Ill Reg 15145	2/25/97
3/7/97	Department of Natural Resources, Illinois List of Endangered and Threatened Fauna (17 Ill Adm Code 1010)	12/2/96 20 Ill Reg 15138	2/25/97
3/9/97	Department of Public Aid, Medical Payment (89 Ill Adm Code 140)	7/26/96 20 Ill Reg 9810	2/25/97
3/9/97	Department of Public Aid, Collections and Recoveries (89 Ill Adm Code 165)	10/11/96 20 Ill Reg 13148	2/25/97
3/9/97	Department of Public Aid, Food Stamps (89 Ill Adm Code 121)	10/11/96 20 Ill Reg 13151	2/25/97
3/12/97	Illinois Racing Board, Jockeys, Apprentices, Jockey Agents and Valets (11 Ill Adm Code 1411)	11/22/96 20 Ill Reg 14987	2/25/97
3/12/97	Illinois Racing Board, Horse Health (11 Ill Adm Code 808)	12/2/96 20 Ill Reg 15155	2/25/97
3/12/97	Illinois Racing Board, Repeal of Medication (11 Ill Adm Code 509)	12/2/96 20 Ill Reg 15176	2/25/97

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

3/12/97	Illinois Racing Board, Medication (11 Ill Adm Code 603)	12/2/96 20 Ill Reg 15161	2/25/97
3/12/97	Illinois Racing Board, PPT (11 Ill Adm Code 314)	12/2/96 20 Ill Reg 15195	2/25/97
3/12/97	Property Tax Appeal Board, Procedures (86 Ill Adm Code 1910)	12/13/96 20 Ill Reg 15657	2/25/97

PROCLAMATIONS

97-8

EVERETT SWANSON CONGRATULATED

Whereas, Everett Swanson retired after more than 40 years of successful farming on December 31, 1996; and

Whereas, Everett is a devoted husband to Jane, loving father to Rhonda, Steve, Evelyn, and Lori, and grandfather to Joshua, Ramon, Nicole, Becki, Lindsay, Leslie, Jeremy, Benjamin, Jamie, Adam, Allison and Jacob; and

Whereas, Everett has been actively involved in the farming industry, including the FFA advisory board, eight years on the Henry County Livestock Feeders Board, and with the Henry County Pork Producers; and

Whereas, Everett has been a leader in his community through his service on the Geneseo Cooperative Gas and Oil Board, as the Chairman of the Finance Committee of the Bi-State Planning Commission, and in his 11 years as director of Farmers National Bank; and

Whereas, Everett has been dedicated to public service, serving on the First United Methodist Church Board for 15 years, working for the Geneseo Endowment for Excellence in Education, and the Abilities Plus Endowment Fund; and

Whereas, Everett has been active in the Republican Party, serving for eight years on the Henry County Board and the Hanna Township Board; and

Whereas, Everett's military service included two years active duty overseas in the United States Army; and

Whereas, Everett Swanson will celebrate his retirement on January 11, 1997, with his friends and loved ones;

Therefore, I Jim Edgar, Governor of the State of Illinois, congratulate Everett Swanson for his many years of dedication in serving the State of Illinois.

Issued by the Governor January 9, 1997.

Filed by the Secretary of State January 17, 1997.

97-9

FFA WEEK

Whereas, Illinois' largest and most productive industry, agriculture, is vital to the future progress and prosperity of our state; and

Whereas, the Future Farmers of America makes a positive difference in the lives of students by developing their potential for premier leadership, personal growth and career success through agricultural education; and

Whereas, in keeping with the purpose of this organization, the National FFA adopted "FFA - Leaders with a Vision" as its national theme; and

Whereas, the Illinois Association FFA theme, "Taking the Reins," signifies the diversity and constant changes of the FFA and agricultural industries, and serves to challenge FFA members to develop those qualities which enable them to pursue future success; and

Whereas, the future lies in the hands of a new generation of agriculturists and more than 14,000 FFA members are preparing for careers in agriculture; and

Whereas, millions of Americans, both rural and urban, have benefited from the efforts of the FFA, and today thousands of young people are developing the

PROCLAMATIONS

leadership to meet the future challenges in agriculture;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim February 15-22, 1997, as FFA WEEK in Illinois. I strongly urge all citizens to strive to understand, encourage and support the dedication and ideals of agricultural education and the Illinois Association FFA.

Issued by the Governor January 9, 1997.

Filed by the Secretary of State January 17, 1997.

97-10

JACKSONVILLE DEVELOPMENTAL CENTER SESQUICENTENNIAL CELEBRATION

Whereas, the State of Illinois established its first mental institution, the Illinois State Hospital for the Insane, on March 1, 1847, to provide for the humane care and treatment of individuals with mental impairment; and

Whereas, in 1974, the hospital's mission was changed to include providing services to individuals with developmental disabilities; and

Whereas, the Department of Mental Health and Developmental Disabilities facility, now known as the Jacksonville Developmental Center, offers diagnosis, remediation, and training which provides the individual with opportunities to achieve personal goals; and

Whereas, for 150 years the Jacksonville Developmental Center has dedicated itself to ensuring the respect and dignity of persons with disabilities and enabling them to become productive citizens;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim March 1, 1997-September 7, 1997, as the JACKSONVILLE DEVELOPMENTAL CENTER SESQUICENTENNIAL CELEBRATION in Illinois.

Issued by the Governor January 9, 1997.

Filed by the Secretary of State January 17, 1997.

97-11

LAND SURVEYORS' MONTH

Whereas, land surveying is one of the oldest technical services of mankind and our complex civilization depends more and more on surveyors' skills and accuracy to determine property rights and methods of design and construction; and

Whereas, the surveying skills of George Washington, the Commander-in-Chief of our Revolutionary Forces, may have had considerable influence on the winning of our national independence since Washington, a land surveyor before the war, directed the planning of military operations and selected the battle sites; and

Whereas, more than 80 years later when the states were threatened by a cruel division, another great president and former surveyor, Abraham Lincoln, was recognized as the "Savior of Our Country" after directing the campaigns that preserved our nation;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim February 1997 as LAND SURVEYORS' MONTH in Illinois in recognition of the two "Land Surveyor Presidents," George Washington and Abraham Lincoln, whose birthdays are observed this month.

Issued by the Governor January 9, 1997.

Filed by the Secretary of State January 17, 1997.

PROCLAMATIONS

97-12

SENIOR CITIZEN CELEBRATION DAY

Whereas, senior citizens deserve respect and recognition for their accomplishments and contributions to their communities; and

Whereas, the Des Plaines Community Senior Centers co-sponsors an annual celebration to honor senior citizens; and

Whereas, Senior Celebration Day is sponsored by the Des Plaines Community Senior Center, Randhurst Shopping Center, District 214 Community Education, Volunteer Center of Northwest Suburban Chicago, Northwest Community Health Care and the villages, cities, senior centers and park districts of Arlington Heights, Buffalo Grove, Des Plaines, Elk Grove Village, Mount Prospect, Prospect Heights, Rolling Meadows, Wheeling and Elk Grove; and

Whereas, the 1997 Senior Celebration Day, "A Salute to Older Adults", will be held May 14, 1997 at the Randhurst Shopping Center and will feature free health screenings, music and entertainment;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim May 14, 1997, as SENIOR CITIZEN CELEBRATION DAY in Illinois.

Issued by the Governor January 9, 1997.

Filed by the Secretary of State January 17, 1997.

97-13

NATIONAL CONFERENCE OF BLACK POLITICAL SCIENTISTS DAYS

Whereas, the National Conference of Black Political Scientists (NCOBPS) was founded in 1969 at Southern University in Baton Rouge; and

Whereas, NCOBPS is a professional organization of more than 200 political scientists and other scholars committed to the study and research of political science and political institutions which clarify the political, economic and social status of black people; and

Whereas, NCOBPS publishes a quarterly newsletter and an annual journal, The National Political Science Review, which enhance its academic focus; and

Whereas, NCOBPS also provides a Graduate Assistant Program, which provides fellowships to minority students pursuing graduate degrees in political science; and

Whereas, the National Conference of Black Political Scientists will hold its annual conference March 12-15, 1997, and celebrate its 28th anniversary during this time;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim March 12-15, 1997, as NATIONAL CONFERENCE OF BLACK POLITICAL SCIENTISTS DAYS in Illinois.

Issued by the Governor January 13, 1997.

Filed by the Secretary of State January 17, 1997.

97-14

PROFESSIONAL SECRETARIES WEEK/PROFESSIONAL SECRETARIES DAY

Whereas, professional secretaries contribute to the strong economic climate throughout Illinois; and

Whereas, professional secretaries in business, education, and government

PROCLAMATIONS

ensure work-force productivity; and

Whereas, the professionalism and leadership of these secretaries enhance commerce in our state;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim April 20-26, 1997, as PROFESSIONAL SECRETARIES WEEK and April 23, 1997, as PROFESSIONAL SECRETARIES DAY in Illinois in recognition of these hard-working individuals and the contributions they make to the business community.

Issued by the Governor January 13, 1997.

Filed by the Secretary of State January 17, 1997.

97-15

STUDENT FINANCIAL AID AND ADMISSIONS AWARENESS MONTH

Whereas, the State of Illinois has a strong commitment to the intellectual growth and career development of all its citizens; and

Whereas, the State of Illinois has fostered the development of an impressive complement of public, private, and proprietary programs of higher education; and

Whereas, a network of student financial assistance programs consisting of grants, scholarships, loans, and jobs provides access to these educational opportunities for thousands of citizens each year; and

Whereas, the Illinois Student Assistance Commission's (ISAC) responsibilities include providing scholarships, grants, and loans and encouraging families to begin saving early for postsecondary education; and

Whereas, ISAC and the state's student financial aid community and the state's college admissions community will provide the service of a student financial aid and admissions helpline February 10-14; and

Whereas, the Illinois Student Assistance Commission, the Illinois Association of Student Financial Aid Administrators, and the Illinois Association of College Admission Counselors are conducting a series of informational programs to boost parent and student awareness about available college admissions and financial aid resources;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim February 1997 as STUDENT FINANCIAL AID AND ADMISSIONS AWARENESS MONTH in Illinois and I encourage those who need financial assistance or admissions information for higher education to take advantage of the opportunity to become more aware of financial aid programs and the college selection process.

Issued by the Governor January 13, 1997.

Filed by the Secretary of State January 17, 1997.

97-16

VETERINARY MEDICAL EDUCATION WEEK

Whereas, activities of the veterinary medical profession benefit every person in the state, directly or indirectly; and

Whereas, veterinarians serve citizens not only by providing care to companion animals and livestock but also through work in medical research, food safety and many other areas; and

Whereas, Veterinary Medical Education Week is sponsored each year by the University of Illinois student chapter of the American Veterinary Medical

PROCLAMATIONS

Association; and

Whereas, Veterinary Medical Education Week begins March 29, 1997, and culminates on April 5, 1997, with an open house at the College of Veterinary Medicine on the Urbana-Champaign campus;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim March 29-April 5, 1997, as VETERINARY MEDICAL EDUCATION WEEK in Illinois and urge Illinoisans to learn more about veterinary education, research and service and how they contribute to our health and welfare.

Issued by the Governor January 13, 1997.

Filed by the Secretary of State January 17, 1997.

97-17

CARTHAGE COLLEGE DAY

Whereas, Carthage College has long been noted as a superior academic institution; and

Whereas, Carthage College is an accredited four-year independent college of the arts and sciences that is affiliated with the Evangelical Lutheran Church in America; and

Whereas, Carthage College is dedicated to giving its students a well-rounded education that is not merely a vocational education; but rather, it is a blending of liberal arts and communications skills, the central ideas of civilization, and solid career preparation; and

Whereas, Carthage College will celebrate its sesquicentennial on January 18, 1997;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim January 18, 1997, as CARTHAGE COLLEGE DAY in Illinois.

Issued by the Governor January 14, 1997.

Filed by the Secretary of State January 17, 1997.

97-18

FEDERAL EMPLOYEE OF THE YEAR DAY

Whereas, in the honorable name of service, dedicated federal employees have made great contributions to Illinois citizens in areas such as Social Security, health care, education, crime prevention, energy conservation, and other essential resources; and

Whereas, each year, a special day is set aside to recognize the outstanding services dedicated federal employees provide; and

Whereas, for the past 39 years, the Chicago Federal Employee of the Year Awards Program has honored outstanding employees for their loyalty and effort; and

Whereas, on May 9, awards will be given to the outstanding employees in each of 11 categories representing all types of jobs within the federal workforce;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim May 9, 1997, as FEDERAL EMPLOYEE OF THE YEAR DAY in Chicago in recognition of the vital services federal employees provide to our citizens and our state.

Issued by the Governor January 14, 1997.

Filed by the Secretary of State January 17, 1997.

PROCLAMATIONS

97-19

GARDEN WEEK

Whereas, the Garden Clubs of Illinois, in cooperation with the National Council of State Garden Clubs, is promoting National Garden Week in Illinois; and

Whereas, setting aside a special week to strengthen communities by encouraging citizens of all ages to work toward common goals; and

Whereas, among Garden Week activities are educational programs, environmental cleanup, community beautification, flower shops, garden walks, youth activities, and workshops; and

Whereas, the Garden Clubs of Illinois is a non-profit organization with more than 9,000 members and 250 clubs throughout Illinois; and

Whereas, the members are concerned citizens willing to devote their time and talents to the conservation, preservation, and beautification of our state's natural treasures and to expand and share our knowledge for the betterment of the environment;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim June 1-7, 1997, as GARDEN WEEK in Illinois.

Issued by the Governor January 14, 1997.

Filed by the Secretary of State January 17, 1997.

Rules acted upon during the quarter of January 1 through March 31, 1997 are listed in the Issues Index by Title number, Part number and Issue number. For example, 50 Ill. Adm. Code 4401 published in Issue 40 will be listed as 50-4401-2. Inquiries about the Issues Index may be directed to the Administrative Code Division at 217-782-4414 or jnatale@ccgate.sos.state.il.us (Internet address).

PROPOSED

89-113-2 83-600-6
2-2250-3 89-114-2,3 86-100-3
2-2251-3 89-117-4 89-102-2
8-270-4 89-120-2 89-112-3,5
8-281-4 89-240-4 89-117-1
11-100-5 89-302-3 89-160-4
11-200-3 89-305-3 89-170-5,6
11-201-3 89-407-1 89-240-3
11-211-3 89-505-3 89-407-3
11-212-3 89-590-1 89-553-5
11-404-3 92-1030-6 89-590-5
11-423-3 92-1002-1

ADOPTED

EMERGENCY

2-560-1
4-1100-2
8-65-3
8-105-3
8-115-3
11-300-3
11-510-3
17-590-2
17-590-2
17-2650-2
20-1265-4
20-1275-4
35-302-1
35-304-1
35-817-4
38-307-2
38-370-2
41-120-3
41-121-3
41-123-3
50-925-6
50-1410-3
50-2405-4
50-4401-6
50-4405-6
50-5602-6
50-6301-6
68-1220-1
68-1455-6
77-692-4
77-1190-1
77-2090-6
80-310-6

PEREMPT.

8-125-4

ILLINOIS REGISTER
ADMINISTRATIVE CODE ORDER FORM

PLEASE USE THIS FORM FOR ALL ORDERS OR TO NOTIFY US OF A CHANGE OF ADDRESS. ALL ORDERS MUST BE PAID IN ADVANCE BY CHECK, MONEY ORDER, VISA, MASTER CARD OR DISCOVER CARD. CHECKS AND MONEY ORDERS MUST BE PAYABLE TO THE "SECRETARY OF STATE".

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___1987___1988___1989___1990___1991___1992___1993___1994___1995___1996

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ANNUAL SUBSCRIPTION AND SUPPLEMENT TO THE ILLINOIS ADMINISTRATIVE CODE; PUBLISHED QUARTERLY @\$290.00

___1996 CODE & 2 SUPPLEMENTS___QUANTITY

TOTAL AMOUNT OF ORDER: \$_____

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MAIL TO:

GEORGE H. RYAN
SECRETARY OF STATE
INDEX DEPARTMENT
111 E. MONROE
SPRINGFIELD, IL 62756

